

P190000 25198

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

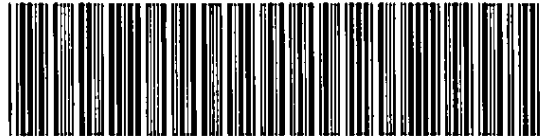
(Document Number)

Certified Copies _____ Certificates of Status _____

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U.S. DEPT. OF COMMERCE
BUREAU OF ECONOMIC ANALYSIS

W19

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: ACC Roofing P.A.
Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Giovanni Varsi
Contact Person

ACC Roofing
Firm/Company

634 S. Spring Garden Ave.
Address

Deland, FL 32720
City, State and Zip Code

gio@accroofing.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Giovanni Varsi at (407) 402-0404
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$105.00 Filing Fees ☐ \$113.75 Filing Fees and Certificate of Status ☐ \$113.75 Filing Fees and Certified Copy ☒ \$122.50 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:

New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filings Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

This Certificate of Conversion **and attached Articles of Incorporation** are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

Acc Roofing, LLC. L17-167153
Enter Name of Other Business Entity

2. The "Other Business Entity" is a Limited Liability Company
(Enter entity type. Example: limited liability company, limited partnership,
general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Florida
(Enter state, or if a non-U.S. entity, the name of the country)

on 05/09/2011
Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

N/A

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

Acc Roofing P.A.
Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 05/09/2011.

(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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CLERK OF STATE
TALLAHASSEE, FLORIDA

Signed this 15 day of March, 2019.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an

Incorporator: Giovanni Varsi

Printed Name: Giovanni Varsi Title: President

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: [Signature]

Printed Name: Giovanni Varsi Title: President

Signature: [Signature]

Printed Name: Antonietta Wetstein Title: Mgr

Signature: [Signature]

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: ACC Roofing P.A.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

Principal street address <u>634 S Spring Garden Ave.</u> <u>Deland, FL 32720</u>	Mailing address, if different is: _____ _____ _____
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ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

for profit roofing + construction

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Giovanni Versi, Pres. Name and Title: _____

Address: 954 Dutchmans Bend Rd Address: _____
DeBary, FL 32713

Name and Title: Antonietta Wetzstein Name and Title: Manager

Address: 1141st street Address: _____
DeBary FL. 32713

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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19 MAR 18 AM 11:17
CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Giovanni Varsi

Address: 954 Dutchmans Bend Rd
DeBary, FL 32713


ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Giovanni Varsi

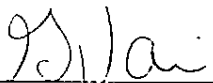
Address: 954 Dutchmans Bend Rd
DeBary, FL 32713

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

3/15/19
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.


Required Signature/Incorporator

3/15/19
Date

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19 MAR 18 AM 1:17
STATE
OF FLORIDA
TALLAHASSEE