P19000058023

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
		MAIL
(Bu	siness Entity Name	2)
(Dc	cument Number)	
Certified Copies	_ Certificates of	of Status
Special Instructions to	Filing Officer:	
	Office Use Only	



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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 13, 2019

JUAN CALDERON 4745 126TH AVE. NORTH CLEARWATER, FL 33762

SUBJECT: REMODELING IMPROVEMENT CORPORATION Ref. Number: W19000046533

We have received your document for REMODELING IMPROVEMENT CORPORATION and your check(s) totaling \$125.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please include a signature in the section ' Required Signature for Florida Profit Corporation ' in the Certificate of Conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 519A00009568

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www.sunbiz.org

Division of Componetions DO DOV 6997 Tollahanna Elavida 99914

COVER LETTER

TO: Charter Section **Division of Corporations** <u>elincy Improvement</u>, LLC Name of Resulting Florida Protit Corporation SUBJECT: mm

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:

) ip mo 21ith AVENUE Charwrter FL. 337102 City. State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Catteron at (<u>134</u>)<u>804-04/08</u> Area Code and Daytime Telephone Number (1)Name of Contact Person

Enclosed is a check for the following amount:

□ \$105.00 Filing Fees □\$113.75 Filing Fees □\$113.75 Filing Fees

and Certificate of Status

\$122.50 Filing Fees. Certified Copy, and and Certified Copy

Certificate of Status

MAILING ADDRESS:

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

STREET ADDRESS:

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

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:

<u>hemockling Improvements LLC</u> Enter Name of Other Business Entity
) Enter Name of Other Business Entity
2. The "Other Business Entity" is a <u>limited lability Company</u> (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 ± 100 ClC. (Enter state, or if a non-U.S. entity, the name of the country)
on <u>21517</u> 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:
· NIA

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

<u>Remodeling</u> Inprovements Corporation

5. If not effective on the date of filing, enter the effective date: <u>4 i 2019</u>. (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.)

<u>Note:</u> 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.

Page 1 of 2

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Required Signature(s) or tighalf of Other Rusiness F	er or if Directors or Officers have not b	een selected an
Printed Name: <u>JU(a)</u> (<u>a () (A)</u> Title: <u>C</u> U Required Signature(s) or light of Other Business E	er. or, if Directors or Officers have not b	een selected an
Required Signature(s) or Denalf of Other Business F	¥	
	Entity: See below for required signature	e(s).]
Signature		
Printed Name: JUGN CALVION		
Signature:		
Printed Name:	Title:	_
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 Signatures of ALL General Partners.	Limited Partnership:	
If Florida Limited Liability Company:		
Signature of a Member or Authorized Representative.		
All adhemer		19
<u>All others:</u> Signature of an authorized person.		HAY 30 PH 3: Manassee Fra
Fees: Certificate of Conversion:	\$35.00	
Fees for Florida Articles of Incorporation:	\$70.00	
Certified Copy: Certificate of Status:	\$8.75 (Optional) \$8.75 (Optional)	

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

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ARTICLE I NAME The name of the corporation shall be: Remodelin	A Inviouements (pros	ration
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:		
4547 Disston Termin Ckarweter FU 126 f 33755 Un	als H. Ave. N. it 63	
<u>ARTICLE III PURPOSE</u> The purpose for which the corporation is organized is: For any and all lawfu	11 business	
ARTICLE IV SHARES The number of shares of stock is: 100		
ARTICLE V INITIAL OFFICERS AND/OR DIRE	ECTORS	
Name and Title: Juan Davila Calderon CEC Address: Same as principal ad Ilearmater FL.	D Name and Title:	19 HAY
Name and Title:	Name and Title:	
Address:	Address:	- PH 3:-
Name and Title:	Name and Title:	
Address:	Address:	

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ARTICLE VI REGISTERED AGENT

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

Name: Juan Davila Cabler Address: <u>1433 S. Belcher Rd Apt</u> DIG Clearwoter FL 33764

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Juan Davila Calderon Name: Same as principal address. Clearwoter FL Address:

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

Required Signature/Registered Agent

3/6/19

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 Dypartment of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

19 MAY 30 PH **.**... 7 m C $\dot{\omega}$ 0 , v 41