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(ке	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	 e #)
•		,
PICK-UP	☐ WAIT	MAIL
_	_	_
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
<u> </u>	<u> </u>	
Special Instructions to	Filing Officer:	;
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Office Use Only

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SECRETARY OF STATE

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COVER LETTER

TO: Charter Section

Tallahassee, FL 32301

Division of Cor	rporations				
SUBJECT: SunStorm	Construction, Inc.				
SOBJECT.	Name of	Resulting Florid	a Profit	Corporation	
	e of Conversion, Article Profit Corporation" in ac			ees are submitted to convert an " 15, F.S.	Other Business
Please return all corresp	pondence concerning this	s matter to:			
Ricky A Lopez					
	Contact Person		_		
SunStorm Construction, I	Inc.				
	Firm/Company		_		
501 E. Las Olas Blvd. Su	ite 200 & 300				
	Address	- 1-3	••		
Fort Lauderdale, FL 3330)1				
	City, State and Zip Code	e	_		
SunBiz@SunStormConst	ruction.com				
E-mail address: (t	o be used for future annu	ual report notific	ation)		
For further information	concerning this matter,	please call:			
Ricky A. Lopez		888 at (345-4	9711	
Name of Co	ontact Person	Area C	ode 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 Filin and Certified C		☐\$122.50 Filing Fees. Certified Copy, and Certificate of Status	
STREET ADDRESS: New Filings Section Division of Corporation Clifton Building			New F Division P. O. E	ilings Section on of Corporations Box 6327	
2661 Executive Center	Circle		Tallah	assee, FL 32314	

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> 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:
Get Solar Estimates, LLC Enter Name of Other Business Entity
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
(Enter state, or if a non-U.S. entity, the name of the country)
01/24/2018
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:
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
SunStorm Construction, Inc.
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date:
(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.

Page 1 of 2



Signed t	his3rd	day of	November	. 20_19	
			fit Corporation:		
Signatur Incorpor	re of Chairma rator:	n, Vice Chairma	n, Director, Officer, or, in	f Directors or Officers hav	e not been selected, an
Printed 1	Name: Ricky	A. Lopez	Title: CEO/Chairman	·	_
				[See below for required si	
Signatur	re:				
Printed 1	Name:	A. Lopez	Title	: <u>MGR</u>	
Signatur	·e:				
Printed 1	Name:		Title:	; <u> </u>	
Signatur	æ:				
Printed 1	Name:		Title	t	
Signatur	re:	<u></u>			
Printed 1	Name:		Title	; <u></u>	
Signatur	e:			a	
Printed 1	Name:		Title	·	,
Signatur	re:				
Printed 1	Name:		Title:	:	
			Limited Liability Partne	rship:	
Signatur	e of one Gen	eral Partner.			S 20
		artnership or I eneral Partners.	imited Liability Limited	d Partnership:	2019 NOV -7 SECRETARY
		liability Compa er or Authorized	<u>ny:</u> Representative.		***
All othe Signatur	ers: re of an autho	rized person.			M 9: 29 OF STATE SEE, FL
ı	Certificate of Fees for Flori Certified Cop Certificate of	ida Articles of li by:	\$8.75		

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

The name of the corporation shall be: SunStorm Construct Output SunStorm Construct SunStorm Construct	tion, Inc.
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
Principal street address 501 E. Las Olas Blvd	Mailing address, if different is: 501 F. Las Olas Blvd
Suite 200 & 300	Suite 200 & 300
Fort Lauderdale, FL 33301	Fort Lauderdale, FL 33301
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is: General Contractor	
ARTICLE IV SHARES The number of shares of stock is:	SECRETAR TALLAHA
ARTICLE V INITIAL OFFICERS AND/OR DI	RECTORS
Name and Title: Ricky A. Lopez - CEO	Name and Title: Enrique Avila - CCO
Address: 501 E. Las Olas Blvd Suite 200 & 300	Address: 17304 Walker Ave. Suite 122
Fort Lauderdale, FL 33301	Miami, FL 33157
Name and Title:	Name and Title:
Address:	Address:
Name and Title:	
Address:	

	and Florida street address (P.O. Box NOT acc	eptable) of the registered agent is:	
Name:	Ricky A. Lopez		
Address:	501 E. Las Olas Blvd Suite 200 & 300		
	Fort Lauderdale, FL 33301		
ARTICL	E VII INCORPORATOR		
The name	and address of the incorporator is:		
Name:	Ricky A. Lopez		
Address:	501 E. Las Olas Blvd Suite 200 & 300		
	Fort Lauderdale, FL 33301		
******	************	*******	
Having be this certifi	een named as registered agent to accept service (icate, I am familiar with and accept the appointn	f process for the above stated corporation at the place designa ent as registered agent and agree to act in this capacity	ted i
		<u> </u>	
	Required Signature/Registered Agent	Date	•
	his document and affirm that the facts stated he to the Department of State constitutes a third de	rein are true. I am aware that any false information submitted gree felony as provided for in s.817.155, F.S.	d in i
		11/03/2019	

Required Signature/Incorporator

TOUS NOV -7 AM 9: 29
SECRETARY OF STATE
STATE AHASSEE, FL

Date