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(Document Number)
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COVER LETTER

Charter Section

Tallahassee, FL 32301

Division of Corporations

TO:

SUBJECT: CENTE	R POINT CONTRAC Name of I	TCRS & ASSOCIA Resulting Florida Profit (TES, No.
The enclosed Certificate Entity" into a "Florida I	e of Conversion, Articles Profit Corporation" in ac	of Incorporation, and fectordance with s. 607.111	es are submitted to convert an "Other Business 5, F.S.
Please return all corresp	ondence concerning this	matter to:	
ANDREA M. FRANCIS			
	Contact Person		
CENTER POINT	Firm/Company	SACCIATES INC.	
PO BOX 89633			
	Address		
TAMPA, FL 33689			
	City, State and Zip Code		
CENTERPOINTCALLO	@GMAIL.COM		
E-mail address: (t	o be used for future annu	ial report notification)	
For further information	concerning this matter,	please call:	
ANDREA M. FRANCIS		at (-3836
Name of Co	ontact Person		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 Corporation Clifton Building 2661 Executive Center		New F Divisio P. O. B	ING ADDRESS: ilings Section on of Corporations Box 6327 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:

Enter Name of Other Business Entity 117000 258201 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) IZ | 2017

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: CENTER POINT CONTRACTORS & ASSOCIATES, INC.

Enter Name of Florida Profit Corporation 10 lel19 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	thisday of	. 20 19
	ed Signature for Florida Profit Corpor	
Signatu Incorpo Printed	orator:Nice Chairman, Director	Officer, or, if Directors or Officers have not been selected, an
Requir	ed Signature(s) on behalf of Other Bus	iness Entity: [See below for required signature(s).]
Signatu	ire:	
		Title: AMBR
Signatu	ire:	,,
Printed	Name:	Title:
Signatu	ire:	
Printed	Name:	Title:
Signatu	ire:	
Printed	Name:	Title:
Signatu	ire:	
Printed	Name:	Title:
Signati	ıre;	
Printed	Name:	Title:
	ida General Partnership or Limited Li- ire of one General Partner.	ability Partnership:
	ida Limited Partnership or Limited Lizures of ALL General Partners.	ability Limited Partnership:
	ida Limited Liability Company: ure of a Member or Authorized Represent	ative.
<u>All oth</u> Signatu	ners: ure of an authorized person.	
Fees:	Certificate of Conversion: Fees for Florida Articles of Incorporatio Certified Copy: Certificate of Status:	\$35.00 on: \$70.00 \$8.75 (Optional) \$8.75 (Optional)

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

RTICLE I	NAME e corporation shall be: CHIER FOILT	CONTRACTORS ASSOCIATES, INC.		
		CONTRACTO THE CONTRACTOR	-	
RTICLE II he principal p	PRINCIPAL OFFICE blace of business/mailing address is:			
Principal street address		Mailing address, if different is:		
2)121 E ADAMO DR AMPA, FL 33619		TAMPA, FL 33689		
RTICLE III	I PURPOSE or which the corporation is organized is:			
COVERNI	-CONTRACTOR AND DESIGN			
			- 3	• ;
			A0.4 64	- SISISI
RTICLE IV	SHARES 100		22 ;	3F 007%
*	shares of stock is.			
RTICLE V	INITIAL OFFICERS AND/OR DIRE	ECTORS	7:43	331 Ex
lame and Titl	e: Andrea M. Francis , Fresident	Name and Title:		•
ddress:	7702 RIVERGATE DR. APT 604	Address:		-
	TAMPA, FL 33619			
lame and Titl	le:	Name and Title:		
iddress:		Address:		
Jame and Titl	le:	Name and Title:		-
ddress:		Address:		_

ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: ANDREA M. FRANCIS TIOZ RIVERSATE DR., APT. GO4 Address: **TAMPA, FL 33619** ARTICLE VII **INCORPORATOR** The name and address of the Incorporator is: ANDREA M. FRANCIS Name: 7702 RIVERGATE DR. APT 604 Address: **TAMPA FL 33619** Having been named as registered agent to accept service of process for the above stated corporation at the place designated in his certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity 11/19/2019 Required Signature/Registered Agent Date submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a ocument to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

11/19/2019

Date