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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

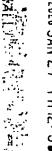
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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: PRESTIGE HOME IMPROVEMENTS, INC.

Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

DAVID M. RUTHERFORD				
Contact Person				
INCOME TAX SDPECIALIST				
Firm/Company				
P.O. BOX 5530				
Address				
DESTIN FL 32540				
City, State and Zip Code				

COUNTRYPRO1@AOL.COM

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

For further information concerning this matter, please call:

WILLIAM J.COX
Name of Contact Person

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$105.00 Filing Fees and Certificate of Status

□ \$113.75 Filing Fees and Certified Copy Certified Copy, and Certificate of Status

Mailing Address:

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

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Conversion For Converting Eligible Entity Into

Florida Profit Corporation

The Articles of Conversion and attached Articles of Incorporation are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:
PRESTIGE HOME IMPROVEMENTS, L.L.C. – L. DUU \ \(\text{J} \) \(\text{UU} \) \(\text{J} \) \(\text{UU} \)
Effet Name of the Converting Entity
2. The converting 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)
(Enter state, or if a non-U.S. entity, the name of the country)
on August 10, 2012
Enter date "Converting Entity" was first organized, formed or incorporated.
3. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation: PRESTIGE HOME IMPROVEMENTS, INC.
Enter Name of Florida Profit Corporation
4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.
5. If not effective on the date of filing, enter the effective date: 01/23/2020
(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.

Signed t	his 23RD day of JANUARY				
Required Signature for Florida Profit Corporation:					
Signatuı	re of Director, Officer, or, if Directors or Office	ers have not been selected, an Incorporator:			
Printed .	Name: WILLIAM J. COX Title: PRE	ESIDENT			
<u>compar</u>	nies: [See below for required signature(s).]	ida partnerships, limited partnerships, and limited liability			
Signatu	re:				
Printed	Name: WILLIAM J. COX	Title: PRESIDENT, SECRETARY			
Signatu	re:				
Printed	Name:	Title:			
Signatu	re:				
Printed	Name:	Title:			
Signatu	re:				
Printed	Name:	Title:			
Signatu	re:				
Printed	Name:	Title:			
Signatu	re:				
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 Flori Signatu	ida Limited Liability Company: are of a Member or Authorized Representative.				
All oth Signatu	ers: are of an authorized person.				
Fees:	Articles of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)			

ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ine name or	The corporation shall be: PRESTIGE HO		
ARTICLE			
The principa	al place of business/mailing address is:		
216 BLUE BEL	Principal street address		Mailing address, if different is:
SANTA	ROSA BEACH FL 32459		
ARTICLE	III PURPOSE e for which the corporation is organized is:		
	RFORM FOR THE GEN	ERAL PU	BLIC RESIDENTIAL
CONS	TRUCTION SERVICES	OF ALL T	YPES AND ANY AND
ALL R	ELATED OPERATIONS	IN ACCO	RDANCE WITH ALL
APPLI	CABLE FEDERAL, STAT	E, COUN	ITY, AND LOCAL
LAWS	S.		
The number	v of shares of stock is: 1,000 COIVII v of shares of stock is: 1,000 COIVII	2	WILLIAM L COX SECRETARY
The number ARTICLE Name and T	v of shares of stock is: 1,000 COIVII v of shares of shar	Name and Ti	tle:
The number ARTICLE Name and T	v of shares of stock is: 1,000 COIVII v of shares of stock is: 1,000 COIVII	2	WILLIAM L COX SECRETARY
The number ARTICLE Name and T Address:	V OFFICERS AND/OR DIRECTORS Fitle: WILLIAM J. COX, PRESIDENT 216 BLUE BELL CIRCLE SANTA ROSA BEACH FL 32459	Name and Ti Address:	WILLIAM J. COX, SECRETARY 216 BLUE BELL CIRCLE SANTA ROSA BEACH FL 32459
ARTICLE Name and T	V OFFICERS AND/OR DIRECTORS Fitle: WILLIAM J. COX, PRESIDENT 216 BLUE BELL CIRCLE	Name and Ti Address:	WILLIAM J. COX, SECRETARY 216 BLUE BELL CIRCLE
The number ARTICLE Name and T Address: Name and T	V OFFICERS AND/OR DIRECTORS WILLIAM J. COX, PRESIDENT 216 BLUE BELL CIRCLE SANTA ROSA BEACH FL 32459 Title:	Name and Ti Address: Name and Ti	WILLIAM J. COX, SECRETARY 216 BLUE BELL CIRCLE SANTA ROSA BEACH FL 32459
The number ARTICLE Name and The Address: Name and The Address:	V OFFICERS AND/OR DIRECTORS WILLIAM J. COX, PRESIDENT 216 BLUE BELL CIRCLE SANTA ROSA BEACH FL 32459 Title:	Name and Ti Address: Name and Ti Address:	WILLIAM J. COX, SECRETARY 216 BLUE BELL CIRCLE SANTA ROSA BEACH FL 32459 tle:
The number ARTICLE Name and The Address: Name and The Address:	V OFFICERS AND/OR DIRECTORS Title: WILLIAM J. COX, PRESIDENT 216 BLUE BELL CIRCLE SANTA ROSA BEACH FL 32459 Title:	Name and Ti Address: Name and Ti Address:	WILLIAM J. COX, SECRETARY 216 BLUE BELL CIRCLE SANTA ROSA BEACH FL 32459
The number ARTICLE Name and The state of t	V OFFICERS AND/OR DIRECTORS WILLIAM J. COX, PRESIDENT 216 BLUE BELL CIRCLE SANTA ROSA BEACH FL 32459 Title:	Name and Ti Address: Name and Ti Address:	WILLIAM J. COX, SECRETARY 216 BLUE BELL CIRCLE SANTA ROSA BEACH FL 32459 tle:

ARTICL The name	E VI REGISTERED AGENT and Florida street address (P.O. Box NOT acceptal	ole) of the registered agent is:
Name:	WILLIAM J. COX	
Address:	216 BLUE BELL CIRCLE	
11441000	SANTA ROSA BEACH FL 32459	
******	*********	**************************************
	een namea as registerea agent to accept service of pr icate, I am familiar with and accept the appointment	ocess for the above stated corporation at the place designated in as registered agent and agree to act in this capacity
,	Wil lan	01/23/2020
	Rentared Signature/Registered Agent	Date