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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: New Filing Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations	
SUBJECT: TUCKER HOME RESTORATION FUC	
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:	
JEROME P. MAUREN JR. Contact Person	
Mc. Graw & Mauren Acety Inc	
Firm/Company	
1216 NW 13th STREET	
Address	
City, State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Same of Contact Person Area Code and Daytime Telephone Number	
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 and Certified Copy Certified Copy, and	
Status Certificate of Status	
Mailing Address: Street Address:	
New Filing Section New Filing Section	
Division of Corporations Division of Corporations	

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



September 2, 2020

JEROME R. MAURER, JR MCGRAW & MAURER ACCTG, INC 1216 NW 13TH STREET GAINESVILLE, FL 32601

SUBJECT: TUCKER HOME RESTORATION, INC.

Ref. Number: W20000099633

We have received your document for TUCKER HOME RESTORATION, INC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The wrong filing form was submitted. I am enclosing the proper form. Note the additional filing fee of \$83.75

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.

Neysa Culligan Regulatory Specialist II

> 20.47 710-77 21

Letter Number: 420A00016885

FILED

Articles of Conversion For Converting Eligible Entity Into

SECRETARY OF STATE TALLAHASSEE, FL

2028 NOV -2 PM 3: 18

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:
TUCKER HOWE RESTORATION, LLC Enter Name of the Converting Entity
2. The converting entity is a Limited Limited liability company, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Horooa
(Enter state, or if a non-U.S. entity, the name of the country)
onEnter date "Converting Entity" was first organized, formed or incorporated.
Enter date "Converting Entity" was first organized, formed or incorporated.
3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> THERE HOME RESTORATION 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: (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florid 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 this $29^{\prime\prime}$ day of $0008ER$. 20 20
Required Signature for Florida Profit Corporation:	<u>.</u>
Signature of Director, Officer, or if Directors or Officer Lus Lucker Printed Name: Chais Topker Title:	
Required Signature(s) on behalf of Converting Flor companies: [Secoclow for required signature(s).] Signature: Printed Name: Chairples Theke	rida partnerships, limited partnerships, and limited liability
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 Signature of one General Partner.	Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
All others: Signature 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)

ARTICLE I NAME The name of the corporation shall be: TUCKER HOME RESTURATION INC.	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is:	
6629 Principal street address STRAET HAUPTON, FL 32044 Mailing address, if different is: SAME	
HAUPTON, FL 32044 SAME	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	7696
The purpose for which the corporation is organized is: Ary Aro All Lebal Purpose The purpose for which the corporation is organized is: The purpose for which the corporation is organized is: The purpose for which the corporation is organized is: The purpose for which the corporation is organized is: The purpose for which the corporation is organized is:	727 NOV -2 PK
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ARTICLE IV SHARES The number of shares of stock is: /D/OOD	
ARTICLE V OFFICERS AND/OR DIRECTORS	
Name and Title: Chrisopher Tucker PRES ame and Title: Chrisopher Tucker	-28c
Name and Title: Christoples Theker Press and Title: Christopher Theker Address: 6629 Sw 954 ST. Address: 6629 Sw 954 ST.	-
Hotupton, Fr 32044 HAMPTON, Fr 328	,44
Name and Title: Name and Title:	
Address: Address:	
Name and Title: Name and Title:	
Address: Address:	

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: ChrisTOPLER TUCKER
Address: 6629 5W 95H ST.
HAMPION, FL 32044
<i>'</i>

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

Date

SECRETARY OF STATE
TAIL AHASSEE, FL