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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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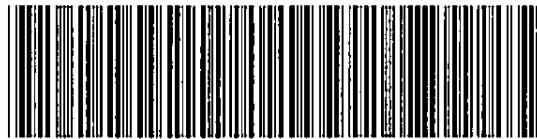
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** \_\_\_\_\_ 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:

Monalissa Almeida  
Contact Person

### Contact Person

Best Choice Services Corp.

**Firm/Company**

1018 Blue grass Dr.

### Address

Groveland, FL

City, State and Zip Code

Monalisa.br@gmail.com

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

For further information concerning this matter, please call:

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

**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:

Best Choice Services Corp.

Enter Name of the Converting Entity

2. The converting entity is a Corp

(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 Maine

(Enter state, or if a non-U.S. entity, the name of the country)

on October 13 20

Enter date "Converting Entity" was first organized, formed or incorporated.

2023 APR 19 PM 12:00  
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3. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

MW Pavers Corp

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 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 this 04 day of 19 19, 2023.

**Required Signature for Florida Profit Corporation:**

Signature of Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:

Monalissa R. Almeida  
Printed Name: Monalissa Almeida Title: President

**Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies:** [See below for required signature(s).]

Signature: Monalissa R. Almeida

Printed Name: Monalissa R. Almeida Title: \_\_\_\_\_

Signature: Harlison Almeida

Printed Name: Harlison Almeida 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 Limited Partnership:**

Signatures of ALL General Partners.

**If Florida Limited Liability Company:**

Signature of a Member or Authorized Representative.

**All others:**

Signature of an authorized person.

**Fees:**

Articles of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

2023 APR 19 PM 12:00

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**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: M W Pavers Corp.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

1018 Bluegrass Dr.  
Grove Land FL 34736

Principal street address  
Mailing address, if different is:  
PO Box 894  
Grove Land FL 34736

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Brick and Pavers Install

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FLORIDA SECRETARY OF STATE

**ARTICLE IV SHARES**

The number of shares of stock is: 1

**ARTICLE V OFFICERS AND/OR DIRECTORS**

Name and Title: Monalisse Almeida President  
Address: 1018 Bluegrass Dr  
Grove Land FL 34736

Name and Title: Varlith Almeida President  
Address: 1018 Bluegrass Dr.  
Grove Land FL 34736

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Mona Lisa Alhida

Address: 1018 Bluegrass Dr  
Graveland FL

\*\*\*\*\*

*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*

Mona Lisa Alhida

Required Signature/Registered Agent

4/19/23

Date

2023 APR 19 PM 12:00  
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