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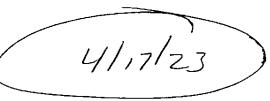
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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Ernest W. Adams Insurance Agency 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:

- retain an conc	spondence concerning ti	his matter to:		
Ernest W.	Adams IV			
	Contact Person			
Ernest W. Adan	ns Insurance Age	ncy Inc.		
	Firm/Company			
115 42nd A	ve NE			
	Address			
Saint Peter	sburg, FL 33	3703		
	City, State and Zip Coc	le	_	
eadams305	@gmail.cor	n		
E-mail address: (to be used for future ann	ual report notific	ation)	
For further information	concerning this matter,	please call:		
Ernest W A	dams IV	at (434	.84	9-7412
Name of Co	ontact Person	_ \		l 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 Filinand Certified C	ng Fees Copy	■\$122.50 Filing Fees, Certified Copy, and Certificate of Status
Mailing Addr New Filing Se Division of Co P.O. Box 6327 Tallahassee, Fl	ction prporations		New F Division The Co 2415 N	Address: iling Section on of Corporations entre of Tallahassee J. Monroe Street, Suite 810 assee, FL 32303



March 27, 2023

ERNEST W. ADAMS IV ERNEST W. ADAMS INSURANCE AGENCY INC. 115 42ND AVE NE SAINT PETERSBURG, FL 33703

SUBJECT: ERNEST W. ADAMS INSURANCE AGENCY INC.

Ref. Number: W23000041285

We have received your document for ERNEST W. ADAMS INSURANCE AGENCY INC. and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the marked sections in the Articles of Conversion. A signature is missing.

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.

Letter Number: 723A00006994

DANIEL L O'KEEFE Regulatory Specialist II

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

bus	siness entity into a Florida Profit Corporation in accordance with ss. 60	07.11933 .	& 607.0202,	Florida Statutes.
1. 7	The name of the Converting Entity immediately prior to the filing of the A	Articles of	Conversion	is:

Enter Name of the Converting Entity	
2. The converting entity is a S-Corp	rs
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)	023 AF
first organized. formed or incorporated under the laws of Virginia	APR -
(Enter state, or if a non-U.S. entity, the name of the country)	7 P
on 04/06/1998	
Enter date "Converting Entity" was first organized, formed or incorporated.	l: 2 9

oration as set forth in the attached Articles of Incorporation:

Ernest W. Adams Insurance Agency 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: 03/02/2023

(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.

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	23	
Required Signature for Florida Profit Corporati		
Signature of Director, Officer, or, if Directors or Of	fficers have not been selected, an Inco	rporator:
Empet M. A. I. W.		
Printed Name: Ernest W. Adams IV Title: Dr	esident	-
Required Signature(s) on behalf of Converting F companies: [See below for required signature(s).]	lorida partnerships, limited partner	ships, and limited liability
Similar		Y
Printed Name: Ernest W. Adams IV		
Signature:	,	/\
Printed Name:		
Signature:		
Printed Name:		
Signature:		
Printed Name:		
Signature:		
Printed Name:		
Signature:		
Printed Name:	Title:	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.		
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y 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

The name of the corporation shall be: Ernest W. Adams Insurance Agency Inc. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Principal street address Mailing address, if different is: 115 42nd Ave NE 115 42nd Ave NE Saint Petersburg, FL 33703 Saint Petersburg, FL 33703 ARTICLE III PURPOSE The purpose for which the corporation is organized is: Recently relocated from VA to FL, will be working remotely for the current insurance operation located in Lynchburg, VA. $\frac{\textit{ARTICLE IV}}{\text{The number of shares of stock is:}} 5,000$ ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: Ernest W. Adams IV, president Name and Title: Melanie A Brown, Vice President 115 42nd Ave NE 115 42nd Ave NE Address: Address: Saint Petersburg, FL 33703 Saint Petersburg, FL 33703 Name and Title:_____ Name and Title: Address: Address: Name and Title: Name and Title: Address: Address:

1 11K (1211114)	and Florida street address (D.O.D. Now.	
Name:	and Florida street address (P.O. Box NOT acceptal Ernest W. Adams IV	ole) of the registered agent is:
Address:	115 42nd Ave NE	
	Saint Petersburg, FL 33703	
**************************************	·***************	******
this certific	en named as registered agent to accept service of procate, I am familiar with and accept the appointment a	cess for the above stated corporation at the place designated in s registered agent and agree to act in this capacity