## P24000058620

(Requestor's Name)			
(Address)			
(Address)			
(City/	State/Zip/Phor	ne #)	
PICK-UP	MAIT	MAiL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificate	es of Status	
Special Instructions to Filing Officer:			





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SECKETARY OF STATE TALLAHASSEE, FLORIDA

024 SEP -9 AH 8: 42

## 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.

	2. I ICH IC	341 (314111	ines.
1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion	n is:		
Revive Pool Solutions, LLC			
Enter Name of the Converting Entity	<u>'</u>		
2. The converting entity is a limited liability company			
(Enter entity type. Example: limited liability company, limited partnershing general partnership, common law or business trust, etc.)	p.		
first organized, formed or incorporated under the laws of			
(Enter state, or if a non-U.S. entity, the name of the country)	-		
5/8/2024			
Enter date "Converting Entity" was first organized, formed or incorporate	 d.		
3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporat</u> Revive Pool Solutions, Inc.	<u>ion:</u>		
Enter Name of Florida Profit Corporation	<b>-</b> •		
4. This conversion was approved by the eligible converting entity in accordance with this chapter current/organic jurisdiction.			
5. If not effective on the date of filing, enter the effective data: 09/04/2024			
5. If not effective on the date of filing, enter the effective date: 09/04/2024  (The effective date: Cannot be prior to nor more than 90 days after the date this document: Department of State.)			
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, listed as the document's effective date on the Department of State's records.	this dat	e will i	iot be
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	SEC.	2024 SEP -9	
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Signed this 4th day of September	20_24	
Required Signature for Florida Profit Corporation:		
Signature of Director, Officer, or, if Directors or Officer  Cultury Morris  Printed Name: Anthony Morris  Title:	ers have not been selected, an Incorporato	r:
Required Signature(s) on behalf of Converting Flor companies: [See below for required signature(s).]		and limited liability
Signature:		_
Printed Name: Kurt Newman	Title:	_
Printed Name: Kurt Newman Signature:		_
Printed Name:		_
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 ALL General Partners.	Limited Partnership:	<b>2024</b> 355 7ALL
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.		2024 SEP -9 SECRETARY
All others: Signature of an authorized person.		元 æ im
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)	8: 42 ORIDA

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

ADDICT D II		
<b>ARTICLE II</b> The principal plac	PRINCIPAL OFFICE e of business/mailing address is:	
I	Principal street address	Mailing address, if different is:
<u>_</u>		
778 Wilson		
Fort Myers	s, FL 33919	
	PURPOSE thich the corporation is organized is:	
To engage in th	ne business of providing pool servi	ce and maintenance, including but not limited to:
Cleaning and sa	anitizing pools, maintaining pool equ	uipment, repairing and replacing pool components,
Providing pool	safety inspections, resurfacing an	d acid washing pools, offering pool maintenance
	and services	
ARTICLE IV	SHARES	
ARTICLE IV The number of sha	SHARES 100	
ARTICLE IV The number of sha		
ARTICLE V	OFFICERS AND/OR DIRECTORS	Kurt Nouman COO
Same and Title:		Name and Title: Kurt Newman, COO
Same and Title: Address:	officers and/or directors Anthony Morris, CEO	Kurt Nouman COO
Same and Title: Address: 2	officers AND/OR DIRECTORS Anthony Morris, CEO 143 SE 15th Ave Tape Coral, FL 33990	Name and Title: Kurt Newman, COO  778 Wilson Ave  Fort Myers, FL 33919
Same and Title: Address: 2	officers and/or directors Anthony Morris, CEO 143 SE 15th Ave Tape Coral, FL 33990	Name and Title: Kurt Newman, COO  778 Wilson Ave Fort Myers, FL 33919  Name and Title:
ARTICLE V Constant of the Address: Constant of the Constant of	officers and/or directors Anthony Morris, CEO 143 SE 15th Ave ape Coral, FL 33990	Name and Title:  Kurt Newman, COO  778 Wilson Ave  Fort Myers, FL 33919  Name and Title:  Address:
ARTICLE V Constant of the Address:  Value and Title:  Constant of the constant	officers and/or directors Anthony Morris, CEO 143 SE 15th Ave Tape Coral, FL 33990	Name and Title:  Kurt Newman, COO  778 Wilson Ave  Fort Myers, FL 33919  Name and Title:  Address:
Same and Title:	officers and/or directors Anthony Morris, CEO 143 SE 15th Ave ape Coral, FL 33990	Name and Title:  Kurt Newman, COO  778 Wilson Ave  Fort Myers, FL 33919  Name and Title:  Address:
ARTICLE V Constant of the Address:  Value and Title:  Constant of the constant	officers and/or directors Anthony Morris, CEO 143 SE 15th Ave Tape Coral, FL 33990	Name and Title:  Kurt Newman, COO  778 Wilson Ave  Fort Myers, FL 33919  Name and Title:  Address:
Jame and Title:	officers and/or directors Anthony Morris, CEO 143 SE 15th Ave ape Coral, FL 33990	Name and Title:  Kurt Newman, COO  778 Wilson Ave  Fort Myers, FL 33919  Name and Title:  Address:  Name and Title:  Name and Title:  Name and Title:

ARTICL	E VI REGISTERED AGENT	
The <u>name</u>	and Florida street address (P.O. Box NOT accepta	ole) of the registered agent is:
Name:	Kurt Newman	
Address:	778 Wilson Ave	
	Fort Myers, Florida 33919	
*****	**************	********
Having be this certifi	en named as registered agent to accept service of pr cate, I am familiar with and accept the appointment	ocess for the above stated corporation at the place designated in the registered agent and agree to act in this capacity.
		week with a serious agree to act in this capacity
		9/4/2024
,	Required Signature/Registered Agent	Date