

L12000160979

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

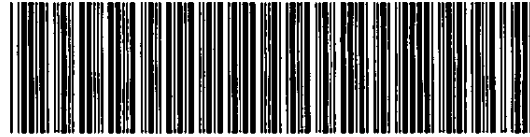
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

EFFECTIVE DATE 01/01/13



100242938201

12/26/12--01041--006 **180.00

FILED

2012 DEC 26 PM 3:06

SECRETARY OF STATE
TALLAHASSEE FLORIDA

D. BRUCE
DEC 27 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BLACK OLIVE EAST NURSERY & LANDSCAPE, LLC
(Name of Resulting Florida Limited Company)

The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.

Please return all correspondence concerning this matter to:

PERRY W. HODGES, JR., ESQ.

(Contact Person)

ROGERS, MORRIS & ZIEGLER LLP

(Firm/Company)

1401 E BROWARD BOULEVARD #300

(Address)

FORT LAUDERDALE, FL 33301-2116

(City, State and Zip Code)

pwhodges@rmzlaw.com

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

For further information concerning this matter, please call:

PERRY W. HODGES, JR. at (954) 462-1431

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization) | <input type="checkbox"/> \$155.00 Filing Fees
and Certificate of
Status | <input checked="" type="checkbox"/> \$180.00 Filing Fees
and Certified Copy | <input type="checkbox"/> \$185.00 Filing Fees,
Certified Copy, and
Certificate of Status |
|---|---|--|--|

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

FILED
2012 DEC 26 PM 3:06
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**CERTIFICATE OF CONVERSION
FOR
"OTHER BUSINESS ENTITY"
INTO
FLORIDA LIMITED LIABILITY COMPANY**

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with Section 608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

BLACK OLIVE EAST NURSERY & LANDSCAPE, INC. 516481

2. The "Other Business Entity" is a corporation first organized, formed or incorporated under the laws of the State of Florida on November 29, 1990.

3. The jurisdiction of the "Other Business Entity" was never changed.

4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

BLACK OLIVE EAST NURSERY & LANDSCAPE, LLC

5. If not effective on the date of filing, enter the effective date: January 1, 2013.

6. The conversion is permitted by the applicable laws governing the other business entity and the conversion complies with such laws and the requirements of Section 608.439, F.S., in effecting the conversion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

Signed this 21st day of December, 2012.

EFFECTIVE DATE 01/01/13

FILED
2012 DEC 26 PM 3:06
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Signature of Member or Authorized Representative of Limited Liability Company:
Individual signing affirms that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in Section 817.155, F.S.

Signature of Member or
Authorized Representative:

Stephen Herndon
STEPHEN HERNDON, Title: Managing Member

Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S. [See below for required signature(s).]

Signature:

Stephen Herndon
STEPHEN HERNDON, Title: President

FILED
2012 DEC 26 PM 3:06
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I — Name:

The name of the Limited Liability Company is:

BLACK OLIVE EAST NURSERY & LANDSCAPE, LLC

ARTICLE II — Address:

The street address of the principal office of the Limited Liability Company is:

3539 Griffin Road
Fort Lauderdale, Florida 33312

The mailing address of the principal office of the Limited Liability Company is:

3691 Griffin Road
Fort Lauderdale, Florida 33312

ARTICLE III — Registered Agent and Registered Office:

The name and the Florida street address of the registered agent are:

STEPHEN HERNDON
4907 Southwest 51st Street
Fort Lauderdale, Florida 33314

ARTICLE IV — Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

Manager

STEPHEN HERNDON
4907 Southwest 51st Street
Fort Lauderdale, Florida 33314

ARTICLE V — Additional Provisions:

Effective date shall be January 1, 2013.

FILED
2012 DEC 26 PM 3:06
SECRETARY OF STATE
TALLAHASSEE FLORIDA

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 21st day of December, 2012.

(In accordance with section 608.408(3), Florida Statutes, the execution of this certificate constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Stephen Herndon
STEPHEN HERNDON

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Stephen Herndon
STEPHEN HERNDON

FILED
2012 DEC 26 PM 3:06
SECRETARY OF STATE
TALLAHASSEE FLORIDA