

LO4000015804

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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LO4-15804
OK

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FRANK HALLORAN TREE SERVICE
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

FRANK HALLORAN
(Name of Person)

FRANK HALLORAN TREE SERVICE
(Firm/Company)

440 FIRESTONE STREET N.E.
(Address)

PALM BAY, FLORIDA 32907
(City/State and Zip Code)

For further information concerning this matter, please call:

FRANK HALLORAN at (321) 722-2479
(Name of Person) (Area Code & Daytime Telephone Number)

CLERK OF STATE
TALLAHASSEE, FLORIDA

02 FEB 23 AM 8:37

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STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

February 10, 2004

FRANK HALLORAN
440 FIRESTONE STREET N.E.
PALM BAY, FL 32907

SUBJECT: FRANK HALLORAN TREE SERVICE
Ref. Number: W04000005577

We have received your document for FRANK HALLORAN TREE SERVICE and check(s) totaling \$125.00 of which \$125.00 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$25.00 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

The filing fee to file the certificate of conversion \$25.00 and \$125.00 to file the articles of organization. A total of \$150.00.,

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 904A00009022

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TALLAHASSEE, FLORIDA

CERTIFICATE OF CONVERSION

Pursuant to section 608.439, Florida Statutes, the following unincorporated business entity hereby submits the attached articles of organization and this certificate of conversion to convert to a Florida limited liability company:

FIRST: The name of the unincorporated business immediately prior to filing this document was:

FRANK HALLORAN TREE SERVICE

SECOND: The date on which and the jurisdiction in which the unincorporated business was first created or otherwise came into being are:

- A. Date: 9/5/2000
B. Jurisdiction: BREVARD COUNTY
C. If different from the above noted jurisdiction, the jurisdiction immediately prior to its conversion: _____

THIRD: The name of the limited liability company as set forth in the attached articles of organization is:

FRANK HALLORAN TREE SERVICE

Frank Halloran

Signature of a Member or an Authorized Representative of a Member
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

FRANK HALLORAN

Typed or Printed Name of Signee

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TREASURER
TALLAHASSEE, FLORIDA

OFFERED 9 AM 8:37

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FILING FEES:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Filing Fee for Registered Agent Designation
- \$ 25.00 Filing Fee for Certificate of Conversion
- \$ 30.00 Certified Copy (optional)
- \$ 5.00 Certificate of Status (optional)

(Note: Section 608.439, F.S., does not provide for a corporation to convert to a limited liability company.)

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

FRANK HALLORAN TREE SERVICE, L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

914 ST. CLAIR STREET
MELBOURNE, FLORIDA
32935

Mailing Address:

440 FIRESTONE STREET N.E.
PALM BAY, FLORIDA
32907

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

PATRICIA A. HALLORAN
Name

440 FIRESTONE STREET N.E.
Florida street address (P.O. Box NOT acceptable)

PALM BAY, FLORIDA 32907
City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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, Florida Statutes.

Patricia A. Halloran
Registered Agent's Signature

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

FRANK HALLORAN
440 FIRESTONE ST. N.E.
PALM BAY, FL. 32907

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Frank Halloran

Signature of a member or an authorized representative of a member.

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

FRANK HALLORAN

Typed or printed name of signer

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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