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COVER LETTER

	ration Section on of Corporations		
SUBJECT: _	Proud Scape (Name of Limited	Seguices I Liability Company)	
The enclosed A	rticles of Organization and fee(s) are si	abmitted for filing.	
Please return al	correspondence concerning this matte	r to the following:	
	Donald Scott	Proud Name of Person)	
		Services	
	Loo Branch 1 Tacksonville	(Address)	
·	Jacksonville	Fl. 32259	
For further info	rmation concerning this matter, please	eall:	
	(Name of Person)	at ()(Area Code & Daytime Te	elephone Number)
Enclosed is a c	check for the following amount:		
☐ \$125.00 Fili:	ng Fee \$\frac{1}{2}\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns



November 22, 2005

DONALD SCOTT PROUD PROUDSCAPE SERVICES 600 BRANCH WATER DR JACKSONVILLE, FL 32259

SUBJECT: PROUDSCAPE SERVICES LLC

Ref. Number: W05000052131

We have received your document for PROUDSCAPE SERVICES LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

You failed to send the money for the conversion. We will need an additional \$25.00.

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) 245-6913.

Diane Cushing Document Specialist

Letter Number: 105A00068833

CERTIFICATE OF CONVERSION

Pursuant to section 608.439, Florida Statutes, the following unincorporated business entity hereby submits the <u>attached articles of organization</u> 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	documen	t was:
PradScape Services		·
SECOND: The date on which and the jurisdiction in which the unincorporated but created or otherwise came into being are: A. Date: B. Jurisdiction: C. If different from the above noted jurisdiction, the jurisdiction immedits conversion:		
THIRD: The name of the limited liability company as set forth in the <u>attached</u> art organization is: Signature of a Member or an Authorized Representative of a Member of a M		·
(In accordance with section 608.408(3), Florida Statutes, the execution of this doct constitutes an affirmation under the penalties of perjury that the facts stated herein	ıment	وچ اد
Typed or Printed Name of Signee		
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)	;) <u>1:</u>

(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

The name of the Limited Liability Company is:	
Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the printing address and street address of the printing address.	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
JAX Fl 32259	1000 Branch Water Dr DX FI 32259
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	
The name and the Florida street address of the re	
Donald Scott &	roud
1000 Brando Water	Dr
Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)
JAX H 32-35 City, State, an	FL d Zip
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate. I hereby accept the appointment as I further agree to comply with the provisions of aliformance of my duties, and I am familiar with and ered agent as provided for in Chapter 608. F.S.

(CONTINUED)
Page 1 of 2

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: "MGR" = Manager "MGRM" = Managing Member MGRM MGRM (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) REQUIRED SIGNATURES 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.)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee