2006 MAR - 1 SECRETARY OF STATE TALLAHASSEE, FLORIDA (Requestor's Name)

(Address) (Address) (City/State/Zip/Phone #)

PICK-UP WAIT MAIL (Business Entity Name)

Certified Copies ___ Certificates of Status_

(Document Number)

Special Instructions to Filing Officer:

wob-64

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Letter Number: 906A00009579

FLORIDA DEPARTMENT OF STATEAR - 1 P 1:56
Division of Corporations SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 9, 2006

WILLIAM MIXON 3014 JOYANN ST. ORLANDO, FL 32810

SUBJECT: MIXON MOWING, LLC Ref. Number: W06000006403

We have received your document for MIXON MOWING, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6094.

Agnes Lunt Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

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TO: Registration Section Division of Corporations	SECRETA
SUBJECT: Mixon A	Mowing LL CTALLAHASSEE, FLORIDA
	Articles of Organization, and fees are submitted to a "Florida Limited Liability Company" in
Please return all correspondence concern	ing this matter to:
William Mixon (Contact Person)	
Mixon Mousing (Firm/Company)	
3014 Joyann S)
3014 Joyann S (Address) Orlando Fl 32 (City, State and Zip Code	<u>810</u>
For further information concerning this n	natter, please call:
(Name of Contact Person)	at (321) 354-8659 (Area Code and Daytime Telephone Number)
Enclosed is a check for the following am	ount:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$ \$155.00 Filing Fees and Certificate of Status	s S \$180.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32301

Certificate of Conversion For

"Other Business Entity"

Into

Florida Limited Liability Company

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2006 MAR - 1 P 1:56 SECRETARY OF STATE TALLAHASSEE, FLORIGA

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 s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this
Certificate of Conversion is:
William Mixon DBA Mixon Mowing
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Sole Proprietorship. (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)
on
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
Florida
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Mixon Mowing, 11C
(Enter Name of Florida Limited Liability Company)

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5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this 1 point document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is SEE. FLORIDA listed therein.)
Signed this 24th day of January 20 06.
Signature of Authorized Person: 20than My
Printed Name: William Mixon Title: Owner, Registered Agent

Fees:

Certificate of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00

Certified Copy: \$30.00 (Optional)
Certificate of Status: \$5.00 (Optional)

Page 2 of 2

ARTICLI

ES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY	COMPAN
	2006 MAR -1
ARTICLE I - Name:	- HAM -1
The name of the Limited Liability Company is:	ECRETARY
1 1 (V C)	ECRETARY CLAHASSEE,
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "L.C.,")	LLC," or
ARTICLE II - Address:	
The mailing address and street address of the principal office of the Limite	ed
Liability Company is:	
Principal Office Address: Mailing Address:	
3014 Joyann Street 3014 Joyann	Smet
Orlando Fl 32810 Orlando, Fl 3	2810
ARTICLE III - Registered Agent, Registered Office, & Registered Ag	ent's
Signature:	
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another	
business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	
William Mixon	
3014 Joyann St	
Florida street address (P.O. Box NOT acceptable)	
Orlando FL 32810	
City, State, and Zip	
Having been named as registered agent and to accept service of process t	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..

Registered Agent's Signature (REQUIRED)

(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: Name and Address: 2006 MAR -1 P 1: 56 Title: "MGR" = Manager "MGRM" = Managing Member (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 SIGNATURE: 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.) Typed or printed name of signee 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)