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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	





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OIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Landscapir (Name of Resulting Flor	ng Perfection, LLC ida Limited Company)	
The enclosed Certificate of Conversion, Article convert an "Other Business Entity" into a "Flor accordance with s. 608.439, F.S.	•	
Please return all correspondence concerning the	s matter to:	
Debra A. Krap (Contact Person) Landscaping Person (Firm/Company) 105 33 Angler (Address) (Address) Orlando, FL 3 (City, State and Zip Code) For further information concerning this matter, (Name of Contact Person)	PR RPORATIONS please call:	
(Name of Contact Person)	(Area Code and Daytime Telephone Number)	
Enclosed is a check for the following amount:	. /	
	\$180.00 Filing Fees, d Certified Copy Certified Copy, and Certificate of Status	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327	
2661 Executive Center Circle	Tallahassee, FL 32314	

Tallahassee, FL 32301

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> 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: Landscaping Perfection (Enter Name of Other Business Entity)				
(Enter Name of Other Business Entity)				
2. The "Other Business Entity" is a <u>General Partnership</u> . (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 <u>Florida</u> (Enter state, or if a non-U.S. entity, the name of the country)				
on 12/2/05 . S (Enter date "Other Business Entity" was first organized, formed or incorporated	ROISIAID 38035			
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:	OF CORP			
N/A	STAI			
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	SNO			
Landscaping Perfection, LLC (Enter Name of Florida Limited Liability Company)				

effective date: more than 90 days after the of State; AND 2) must be the f Organization, if an effective	same as the
cy 20 07 .	
ca a. Kleapf	- -
itle: Owner	
\$25.00 : \$125.00 \$30.00 (Optional) \$5.00 (Optional)	SECRETARY OF STATE OF VISION OF CORPORATIONS 07 MAR -6 PM 3: 15
	state; AND 2) must be the organization, if an effective at 20 D7. State: Owner \$25.00 \$125.00 \$30.00 (Optional)

ARTICLE I - Name:

The name of the Limited Liability Company is:

andscaping Perfection

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must end with the words "Limited Hability Company, "Limited Company" or their abbreviation "LLC," or

2.0,,)			
ARTICLE II - Address: The mailing address and street address of the princip Liability Company is:	oal office of the Limited		
Principal Office Address:	ailing Address:		
10533 Angler Ct. Orlanda, FL 32825	0533 Angler Ct. Orlando, FL 32825		
ARTICLE III - Registered Agent, Registered Off Signature: (The Limited Liability Company cannot serve as its own Registered A individual or another business entity with an active Florida registration.) The name and the Florida street address of the regist	Agent. You must designate an SORPORATIO		
•	Square Blud, Suite 101 NOT acceptable)		
City, State, and Zip			

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..

Mary on Spalinger, Asst-Sce.

Registered Agent's Signature (REQUIRED)

BUSINESS Filings Incorporated

(CONTINUED)

Page 1012

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
marm	George W. Krapf			
	Orlando, FL 32825			
<u>mgem</u>	Debra A. Krapf 10533 Angler Ct. Orlando, FL 32825			
				
(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:	ORA 3:			
1 Oebra a. Kleapf				
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.)				
Debra A. Krapf 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)