

608 00000 7452

(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



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

608-7452



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 7, 2008

EVELYN TAYLOR  
147 AURORA LANE  
KISSIMMEE, FL 34758

SUBJECT: SPV LANDSCAPING & IRRIGATION, LLC  
Ref. Number: W08000000751

We have received your document for SPV LANDSCAPING & IRRIGATION, 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):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

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  
Regulatory Specialist II

Letter Number: 908A00001137

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TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SPV LANDSCAPING & IRRIGATION, 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:

EVELYN TAYLOR

(Contact Person)

(Firm/Company)

147 AURORA LANE

(Address)

KISSIMMEE, FL 34758

(City, State and Zip Code)

For further information concerning this matter, please call:

EVELYN TAYLOR

(Name of Contact Person)

at ( 407 ) 201-4383

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$150.00 Filing Fees  
(\$25 for Conversion  
& \$125 for Articles  
of Organization)

☒ \$155.00 Filing Fees  
and Certificate of  
Status

☐ \$180.00 Filing Fees  
and Certified Copy

☐ \$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

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TALLAHASSEE, FLORIDA

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**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 s.608.439, Florida Statutes.

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

SPV LANDSCAPING & IRRIGATION, INC 055-134064

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a CORPORATION

(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 OCT.10, 2005

(Enter date "Other Business Entity" was first organized, formed or incorporated)

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:

N/A

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

SPV LANDSCAPING & IRRIGATION, LLC

(Enter Name of Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

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make this effective DATE  
JAN. 05, 2008  
~~DEC. 15, 2007~~ Elyn

5. If not effective on the date of filing, enter the effective date: DEC. 15, 2007.  
(The effective date: 1) cannot be prior to nor more than 90 days after the date this 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 listed therein.)

Signed this 15 day of DEC. 20 07

Signature of Authorized Person: Elyn

Printed Name: EVELYN TAYLOR Title: 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)

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TALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

**SPV LANDSCAPING & IRRIGATION, LLC**

(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC.")

## ARTICLE II - Address:

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

### Principal Office Address:

13750 W. COLONIAL DRIVE

SUITE 350-311

WINTER GARDEN, FL 34787

### Mailing Address:

13750 W. COLONIAL DRIVE

SUITE 350-311

WINTER GARDEN, FL 34787

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent'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:

**EVELYN TAYLOR**

**147 AURORA LANE**

Florida street address (P.O. Box **NOT** acceptable)

**KISSIMMEE, FL 34758**

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.*

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**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

FRANCIS DIAZ

2473 LAUREL BLOSSOM CIRCLE

OCOE, FL 34761

MGR

DIANERIS DIAZ

2473 LAUREL BLOSSOM CIRCLE

OCOE, FL 34761

MGRM

RAMIRO RANGEL

1022 PRINCESTON AVE

CLERMONT, FL 34711

MGRM

MARLON BHOORASIGH

1006 SHADY MAPLE CIRCLE

OCOE, FL 34761

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: DEC. 15, 2007 Jan. 5, 2008  
(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.)

EVELYN TAYLOR

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)**

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

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