# LO9000019719

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Consideration A. Ellin Office			
Special Instructions to Filing Officer:			

Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATIONS

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T. HAMPTON

FEB 2 7 2009

EXAMINER

## **COVER LETTER**

Registration Section Division of Corporations

Tallahassee, FL 32301

TO:

SUBJECT: Going Gree	en Landscape Partners LL				
SUBJECT: Going Green Landscape Partners LL (Name of Resulting Florida Limited Company)					
The enclosed Certificate of Conversion, Ar convert an "Other Business Entity" into a "accordance with s. 608.439, F.S.	ticles of Organization, and fees are submitted t Florida Limited Liability Company" in				
Please return all correspondence concerning	g this matter to:				
Witcle Cooper (Contact Person)  Going Green Landscape Par (Firm/Company)	rtners				
10131 Tween Waters St (Address)					
(Address)  Clermont, FL 34715  (City, State and Zip Code)					
(City, State and Zip Code)					
For further information concerning this ma	tter, please call:				
Nicole Cooper	at ( 407 ) 758 - 5536  (Area Code and Daytime Telephone Number)				
(Name of Contact Person)	(Area Code and Daytime Telephone Number)				
Enclosed is a check for the following amou	nt:				
\$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:	MAILING ADDRESS:				
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
Clifton Building	P. O. Box 6327				
2661 Executive Center Circle	Tallahassee, FL 32314				

# **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:				
Certificate of Conversion is:  Going Green Landscape Partners.  (Enter Name of Other Business Entity)				
(Enter Name of Other Business Entity)				
2. The "Other Business Entity" is a <u>Sole Proprietorship</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 Florida				
(Enter state, or if a non-U.S. entity, the name of the country)				
on <u>December 27, 2008</u> (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:				
$\mathcal{N}/\!\!\!A$				
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:				
Going Green Landscape Partners LLC (Enter Name of Florida Limited Liability Company)				
(Enter Name of Florida Limited Liability Company)				
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				
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				

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listed therein.)

Signed this _	22	day of _	February	20 <u><b>09</b></u>	
Signature of	f Membei	r or Auth	orized Represent	ative of Limited Liability	Company:
Signature of Printed Name	Member o	or Author	rized Representativ	ve: W. Clu Col Title: Presiden	gar_
Signature(s)	on behalf	of Other	· Business Entity:	[See below for required sig	gnature(s).]
Signatura: N	UM	LS COC	1000r		
Printed Name	e.NIC	de C	coper	Title:	
Signature: _					<u> </u>
Printed Name	e:			Title:	
Signature:					
Printed Name	e:			Title:	
Signature: _				Title:	·-·
Printed Name	e:			Title:	<del></del>
Signature: _				Title:	
Printed Name	e:			Title:	
Signature: _					<del></del>
Printed Name	e:			Title:	
_	Chairman,	Vice Cha	tirman, Director, or been selected, an Ir	· Officer. ncorporator must sign.	
If Florida Go Signature of o			or Limited Liabil	ity Partnership:	
If Florida Li Signatures of				ity Limited Partnership:	
All others: Signature of a	an authoriz	zed persoi	1.		
Fees:					
Certi	ficate of C	Conversio	n:	\$25.00	09F

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status: \$125.00

Page 2 of 2

\$30.00 (Optional) \$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:	
(Must end with the words "Limited Liability Company," the abb	reviation "L.L.C.," or the designation
ARTICLE II - Address: The mailing address and street address of the pri Liability Company is:	ncipal office of the Limited
Principal Office Address:	Mailing Address:
10131 Tween Waters St Clermont FL 34715	10131 Tween Waters St Chermont FL 34715
ARTICLE III - Registered Agent, Registered Signature: (The Limited Liability Company cannot serve as its own Registe individual or another business entity with an active Florida registration.)	
The name and the Florida street address of the re	gistered agent are:
<u>Vicole Cooper</u> Name	
Name 10131 Tween Wa	
Florida street address (P.O. l	
Clermont	FL 34715
City, State,	, and Zip
Having been named as registered agent and to	accept service of process for the

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..

Micola Capar

Basistand Assay's Signature (RECHIRED)

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2 SECRETARY OF STATE

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	Nicole Cooper
7.010.11	10131 Tween Waters St
	Clermont FL 34715
MGRM	Jimmy D. Cooper
	10131 Tween Waters St Clermont FL 34715
	ST/IS
	(Use attachment if necessary)
	(Ose attachment if necessary)
ARTICLE V: Effective date, if other than the	e date of filing: (OPTIONAL)
(The effective date: 1) cannot be prior to r	,
document is filed by the Florida Departme	
the effective date listed in the attached C date is listed therein.)	ertificate of Conversion, if an effective
DECLIDED SIGNATURE.	
REQUIRED SIGNATURE:	
Since Copy in	44
<u> </u>	thorized representative of a member.
of this document constitutes an af	408(3), Florida Statutes, the execution firmation under the penalties of perjury ated herein are true.)
Nicole coop	er
Typed or prin	ted name of signee
Filing Fees:	
	0 2M N 25

\$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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