12900054410

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
48000	10434	15

Office Use Only

G. MCLEOD

JUN -5 2009

EXAMINER



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SECRETARY OF STATE
DIVISION OF COMP SAALOR

COVER LETTER

TO: Registration S Division of C			
SUBJECT: McCra	Name of Resulting	andscape, LLC Florida Limited Compar	ny)
	siness Entity" into a "		n, and fees are submitted to oility Company" in
Please return all corre	espondence concerning	g this matter to:	
Franklin D McCray II			
<u> </u>	(Contact Person)		
McCrays Irrigation & La	inscape		
<u></u>	(Firm/Company)	· · · · · · · · ·	
6122 E Lynn St			
<u> </u>	(Address)		
luuranna Elanida 24	450		
Inverness, Florida, 344	ity, State and Zip Code)		
(
For further information	on concerning this ma	tter, please call:	
Franklin D McCray		at (352) 42	2-4788
(Name of Conta	ct Person)	(Area Code and	Daytime Telephone Number)
Enclosed is a check f	or the following amou	int:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	S180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS Registration Section Division of Corporate Clifton Building 2661 Executive Cent Tallahassee, FL 3236	ions er Circle	Registration of P. O. Box 6	Corporations

09 JUN -4 AH 10: 44

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:
McCrays Irrigation & Landscape
(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, ctc.)
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 April 7, 2009
(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:
Florida
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
McCrays Irrigation & Landscape, LLC
(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
listed therein.)

Signed this day of May	20 <u>09</u>
	resentative of Limited Liability Company:
Signature of Member or Authorized Repress Printed Name: Franklin D McCray II	entative: Handis Myt
	utity: [See below for required signature(s).]
Signature: Transi D. M.	Centle
Printed Name: Franklin D McCray II	Title: President
Signature:	Title:
I fillited (Varies	IIIIO.
Signature:	Title:
Printed Name:	Title:
Signature:	
Printed Name:	Title:
	··· ·
Signature:	Title:
Printed Name:	11de:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Directors or Officers have not been selected	
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:
All others: Signature of an authorized person.	
Fecs:	
Certificate of Conversion: Fees for Florida Articles of Organiza Certified Copy: Certificate of Status:	\$25.00 ation: \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan The name of the Li		ompany is:		
McCrays Irrig (Must end with the words "LLC.")			C reviation "L.L.C.," or the design	mation
ARTICLE II - Ad The mailing addres Liability Company	s and street addre	ss of the pri	ncipal office of the Lin	nited
Principal Office A	ddress:		Mailing Address:	-
6122 E Lynn Street		79	6122 E Lynn St,	
Inverness, Fl 34452			Inverness, Fl 34452	
Signature: (The Limited Liability Coindividual or another business entity with an a	· -	_	ered Agent. You must designate	: 2n
The name and the I	Florida street addı	ress of the re	egistered agent are:	
	Franklin D McCi	ray II		_
	0400 51 04	Name		
	6122 E Lynn St		Box NOT acceptable)	_
	riorida direct de	.0.1) 00010	Dox 1101 Hocopianc)	
	Inverness		FL 34452	_
		City, State	e, and Zip	
			accept service of proces ice designated in this cer	

Having heen 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)
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:

"MGR" = Manager "MGRM" = Managing Mcmber	
MGR	Franklin D McCray
	6122 E Lynn St
	Inverness, Fl 34452
<u> </u>	· · ·
	(Use attachment if necessary)
	the date of filing:(OPTIONAL)
ective date: 1) cannot be prior t nt is filed by the Florida Depart ctive date listed in the attached	the date of filing:(OPTIONAL) to nor more than 90 days after the date this ment of State; AND 2) must be the same as
ective date: 1) cannot be prior to the filed by the Florida Depart ctive date listed in the attached isted therein.) REQUIRED SIGNATURE:	the date of filing: (OPTIONAL) to nor more than 90 days after the date this ment of State; AND 2) must be the same as I Certificate of Conversion, if an effective
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ent is filed by the Florida Departed tive date listed in the attached isted therein.) REQUIRED SIGNATURE: Signature of a member or an of this document constitutes ar	the date of filing: (OPTIONAL) to nor more than 90 days after the date this ment of State; AND 2) must be the same as I Certificate of Conversion, if an effective
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ective date: 1) cannot be prior to the filed by the Florida Depart ctive date listed in the attached isted therein.) REQUIRED SIGNATURE: Signature of a member or an of this document constitutes are that the facts Franklin D McCray II	the date of filing: (OPTIONAL) to nor more than 90 days after the date this ment of State; AND 2) must be the same as I Certificate of Conversion, if an effective authorized representative of a member. 08.408(3), Florida Statutes, the execution affirmation under the penalties of perjury

\$125.00 Filing Fee for Articles of Organization and Design of Registered Agent

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

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