# L10000045876

| (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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J. BRYAN

APR 2 9 2010

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section
Division of Corporations

2661 Executive Center Circle

Tallahassee, FL 32301

SUBJECT: Capital Asphalt Repair and Lawn Care 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:

| Michael E. Watts   |  |                           |               |  |
|--|--|---------------------------|---------------|--|
|  | (Contact Person)                               |                           | <del></del> . |  |
| Capital Asphalt Repair a   | nd Lawn Care LLC                               |                           |               | ASS.   |
|  | (Firm/Company)                                 |                           | <del></del>   | řác<br>Me  |
| Post Office Box 10276  |  |                           |               | · in <sup>Till</sup><br>にい   |
|  | (Address)                                      |                           |               | 97   |
| Tallahassee, FL 32302  |  |                           |               | 900  |
| (1   | City, State and Zip Code)                      | <del></del>               |               |  |
| purface223@aol.com   |  |                           |               |  |
| E-mail Address: (to b  | e used for future annual re                    | port notification         | ıs)           |  |
| For further informati  | on concerning this ma                          | tter, please ca           | ıll:          |  |
| Michael E. Watts   |  | at ( 850                  | ) 491-0       | 0512   |
| (Name of Conta   | act Person)                                    |                           | ode and Da    | aytime Telephone Number)   |
| Enclosed is a check t  | for the following amou                         | int:                      |               |  |
| □ \$150.00 Filing Fees<br>(\$25 for Conversion<br>& \$125 for Articles<br>of Organization) | \$155.00 Filing Fees and Certificate of Status | \$180.00 Fi and Certified |               | ☐\$185.00 Filing Fees,<br>Certified Copy, and<br>Certificate of Status |
| STREET ADDRES  | S:   | MA                        | ILING A       | ADDRESS:   |
| Registration Section   |  | -                         | istration     |  |
| Division of Corporat   | ions   |                           |               | Corporations   |
| Clifton Building   |  | P. C                      | ). Box 63     | 27   |

Tallahassee, FL 32314

# **Certificate of Conversion**

For

# "Other Business Entity"

Into

Into
Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted in 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: Capital Asphalt Repair and Lawn Care Inc.  # P03000068209   |
| (Enter Name of Other Business Entity)   |
| 2. The "Other Business Entity" is a Corporation  (Enter entity type. Example: corporation, limited partnership, 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 June 2003  |
| (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:   |
| Capital Asphalt Repair and Lawn Care 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 |
|   |

| Signed this 29th day of April  | 20   |            |
|--|--|------------|
| Signature of Member or Authorized Representa   |  |            |
| Signature of Member or Authorized Representativ<br>Printed Name: Michael E. Watts                            | e: Title: President  | H & r.     |
| Signature(s) on behalf of Other Business Entity:   | See below for required signa                                   | ture(s).]  |
| Signature: Mil E Will  |  |            |
| Printed Name: Michael E Watts  | Title:   |            |
| Signature:   |  | ,          |
| Signature: Printed Name:   | Title:   |            |
| Signature:   |  |            |
| Printed Name:  | Title:   |            |
| Signature:   |  |            |
| Printed Name:  | Title:   |            |
| Signature:   |  | <b>S</b> . |
| Printed Name:  | Title:   | SC 3       |
| Signature:   | · · · · · ·  | APR T      |
| Printed Name:  | Title:   | Ø7 N ****  |
| If Florida Corporation:  | 0.00   | 3 € m      |
| Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc   |  |            |
|  | •  | 36 S       |
| If Florida General Partnership or Limited Liabili Signature of one General Partner.                          | ty Partnership:  | •          |
| If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.                      | ty Limited Partnership:  |            |
| All others: Signature of an authorized person.   |  |            |
| Fees:  |  |            |
| Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: | \$25.00<br>\$125.00<br>\$30.00 (Optional)<br>\$5.00 (Optional) |            |

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

|  | Repair and Lawn Care LLC<br>words "Limited Liability Compan  | ny," the abbreviation "L.L.C.," or the designation  |
|--|--|---|
| ARTICLE II -   | Addross  |   |
|  |  | of the principal office of the Limited  |
| Liability Comp   |  | •   |
| Principal Offic  | ce Address:  | Mailing Address:  |
| 4017 Face Serve  |  | Post Office Box 10276   |
| 4817 Easy Street   |  |   |
| Tallahassee, FL 3  |  | Tallahassee, FL 32302  gistered Office, & Registered Agent's  |
| Tallahassee, FL 3  ARTICLE III Signature:  | - Registered Agent, Re   | Tallahassee, FL 32302 gistered Office, & Registered Agent's   |
| ARTICLE III Signature: (The Limited Liabili individual or another                      | - Registered Agent, Re   | gistered Office, & Registered Agent's   |
| ARTICLE III Signature: (The Limited Liabili individual or another business entity with | - Registered Agent, Re ity Company cannot serve as its or h an active Florida registration.)   | Tallahassee, FL 32302  gistered Office, & Registered Agent's own Registered Agent. You must designate       |
| ARTICLE III Signature: (The Limited Liabili individual or another business entity with | - Registered Agent, Re ity Company cannot serve as its or h an active Florida registration.)   | Tallahassee, FL 32302 gistered Office, & Registered Agent's   |
| ARTICLE III Signature: (The Limited Liabili individual or another business entity with | - Registered Agent, Re ity Company cannot serve as its or h an active Florida registration.)   | gistered Office, & Registered Agent's own Registered Agent. You must designate of the registered agent are: |
| ARTICLE III Signature: (The Limited Liabili individual or another business entity with | - Registered Agent, Resity Company cannot serve as its or an active Florida registration.) The Florida street address  Michael E. Watts                      | gistered Office, & Registered Agent's own Registered Agent. You must designate of the registered agent are: |
| ARTICLE III Signature: (The Limited Liabili individual or another business entity with | - Registered Agent, Restry Company cannot serve as its or in an active Florida registration.) The Florida street address  Michael E. Watts  4817 Easy Street | gistered Office, & Registered Agent's own Registered Agent. You must designate of the registered agent are: |
| ARTICLE III Signature: (The Limited Liabili individual or another business entity with | - Registered Agent, Restry Company cannot serve as its or in an active Florida registration.) The Florida street address  Michael E. Watts  4817 Easy Street | gistered Office, & Registered Agent's own Registered Agent. You must designate of the registered agent are: |
| ARTICLE III Signature: (The Limited Liabili individual or another business entity with | - Registered Agent, Restry Company cannot serve as its or in an active Florida registration.) The Florida street address  Michael E. Watts  4817 Easy Street | gistered Office, & Registered Agent's own Registered Agent. You must designate of the registered agent are: |

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)
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 Member  MGR  CLE V: Effective date, if other than the date fective date: 1) cannot be prior to nor ent is filed by the Florida Department ective date listed in the attached Cerlisted therein.)  REQUIRED SIGNATURE: | (OPTIONAL) more than 90 days after the date this of State; <u>AND</u> 2) must be the same as  |
|---|---|
| MGR  CLE V: Effective date, if other than the date feetive date: 1) cannot be prior to nor ent is filed by the Florida Department ective date listed in the attached Cerlisted therein.)  | PO Box 10276 Tallahassee, FL 32302  (Use attachment if necessary)  te of filing: (OPTIONAL)  more than 90 days after the date this of State; AND 2) must be the same as |
| CLE V: Effective date, if other than the date feetive date: 1) cannot be prior to nor ent is filed by the Florida Department ective date listed in the attached Cerlisted therein.)   | PO Box 10276 Tallahassee, FL 32302  (Use attachment if necessary)  te of filing: (OPTIONAL)  more than 90 days after the date this of State; AND 2) must be the same as |
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| Sective date: 1) cannot be prior to nor ent is filed by the Florida Department ective date listed in the attached Cerlisted therein.)   | (OPTIONAL)  more than 90 days after the date this of State; AND 2) must be the same as  |
| listed therein.)  | titicata of Convorsion if an Attective  |
| REQUIRED SIGNATURE:   | uncate of Conversion, it an effective   |
|   |   |
| 1/8/14/8  | 2   |
| Signature of a member or an author  | prized representative of a member.  |
| _   | _   |
| of this document constitutes an affirm  | 8(3), Florida Statutes, the execution mation under the penalties of perjury d herein are true.)   |
| Michael Eugene L.  Typed or printed   | )ATTS 50.   |
| Typed or printed  | I 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)

Page 2 of 2