# L10000091055

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



600184516526

08/23/10--01039--027 \*\*155.00

### **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: Billy Woolkine (Name of Resulting Flo	Lawn Service
(Name of Resulting Flo	rida Limited Company)
The enclosed Certificate of Conversion, Article convert an "Other Business Entity" into a "Floaccordance with s. 608.439, F.S.	
Please return all correspondence concerning the	nis matter to:
Billy Was laine (Contact Person)  Billy Was laine Lawn S (Firm/Company)  1814 Madison Jul (Address)	pervice Inc
1814 Madison July (Address)	circle
Apply Fi 3	2712 nenforcement & amail.com
For further information concerning this matter	
me	1(407) 394-7370
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:	. ~
	\$180.00 Filing Fees and Certified Copy 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



### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 24, 2010

BILLY WOODLWINE 1814 MADISON IVY CIRCLE APOPKA, FL 32712

SUBJECT: BILLY WOOLWINE LAWN SERVICE LLC

Ref. Number: W10000039988

We have received your document for BILLY WOOLWINE LAWN SERVICE 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):

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 210A00020341

FILED

10 AUG 30 AM 9: 05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

## 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:  Billy (A) polypool Laura Service Inc
(Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)  2. The "Other Business Entity" is a
first organized, formed or incorporated under the laws of Florida  (Enter state, or if a non-U.S. entity, the name of the country)
(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:
Articles of Organization:  Billy Wolwing Lawn Service  Control of
(Enter Name of Florida Limited Liability Company)
The effective date: 1) cannot be prior to nor more than 90 days after the date this locument 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 $\frac{28}{}$ day of $\frac{1}{}$	_20 <u>/0</u>
Signature of Member or Authorized Representa	tive of Limited Liability Company:
Signature of Member or Authorized Representative Printed Name: Billy Woolwine	Title: owner / operator
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s).
Signature: Printed Name: Billy Woolwing	Title: Owner / operator
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
Signature: Printed Name:	_ Title:
Signature: Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y 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 \$125.00 \$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 LLC.")	Hability Company," the	abbreviation "L.L.C.," or the designation
ARTICLE II - Address: The mailing address and s Liability Company is:	treet address of the	principal office of the Limited
Principal Office Address	<u>:</u>	Mailing Address:
1814 Madison In	circle	Same
A		
Signature: (The Limited Liability Company ca		ed Office, & Registered Agent's
Signature: (The Limited Liability Company coindividual or another business entity with an active Flor	annot serve as its own Req	gistered Agent. You must designate an
Signature: (The Limited Liability Company coindividual or another	annot serve as its own Req	gistered Agent. You must designate an
Signature: (The Limited Liability Company caindividual or another business entity with an active Florida  The name and the Florida	annot serve as its own Reprida registration.)  street address of the Billy Woold National National Actions in the Control of t	e registered agent are:
Signature: (The Limited Liability Company coindividual or another business entity with an active Florida  The name and the Florida	annot serve as its own Regrida registration.)  street address of the Billy Woold Nath Madison I	e registered agent are:
Signature: (The Limited Liability Company coindividual or another business entity with an active Florida  The name and the Florida	annot serve as its own Regrida registration.)  street address of the Billy Woold Nath Madison I	e registered agent are:

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: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_ (OPTIONAL) (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 Certificate of Conversion, if an effective date is listed therein.) 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 periody that the facts stated herein are true.)

Filing Fees:

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

Typed or printed name of signee

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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