#1/4000056408

(Requestor's Name)
(Address)
(Address)
(idd.osc)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodinent Maniber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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04/03/14--01019--028 **185.00



SECRÉTARY OF STATE TALLAHASSEE, FLORIDA 2014 APR -3 PM 1:4

K. SALY EXAMINER APR - 7 2014

COVER LETTER

TO: Registration Section Division of Corp					
SUBJECT: Central Flo	orida Hardscapes	, LL	С		
	(Name	of Re	sulting Florida	Limite	d Company)
			_		d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all correspondent	ondence concerning	g thi	s matter to:		
Mary R. Palmer					
(1	Contact Person)				
Central Florida Hards	capes				
()	Firm/Company)				
39 Pinwheel Lane					
	(Address)		·		
Palm Coast, Florida 3	2164				
(City,	State and Zip Code)				
cflhardscapes@gmail.	.com				
E-mail Address: (to be us	ed for future annual re	ort n	otifications)		
For further information of	concerning this mat	ter,	please call:		
Mary R. Palmer		at i	386	313-	5255
(Name of Contact P	erson)	a. '		(Day	time Telephone Number)
Enclosed is a check for t	he following amou	nt:			
(\$25 for Conversion an	\$155.00 Filing Fees d Certificate of atus		\$180.00 Filing I Certified Copy		S\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:					DDRESS:
Registration Section			Registra		
Division of Corporations Clifton Building	5		Division P. O. Bo		orporations
2661 Executive Center (Circle				FL 32314

Tallahassee, FL 32301

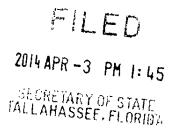


Statutes.

Articles of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

"Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida



The Articles of Conversion and attached Articles of Organization are submitted to convert the following

The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: entral Florida Hardscapes, Inc. $\#P/400(0x)170$.
(Enter Name of Other Business Entity)
The "Other Business Entity" is a corporation
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
irst organized, formed or incorporated under the laws of Florida
01/02/2014 (Enter state, or it a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation)
The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
entral Florida Hardscapes, LLC
(Enter Name of Florida Limited Liability Company)
If not effective on the date of filing, enter the effective date: 04/10/2014
The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the ate this document is filed by the Florida Department of State; <u>AND</u> 2) must be the same as the effective ate listed in the attached Articles of Organization, if an effective date is listed therein.)
The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.

Page 1 of 2

Signed this 1	day of <u>April</u>	2014
Signature of Aut	horized Representative of Lim	ited Liability Company:
Signature of Author	orized Representative: <u>MCW</u> v R. Palmer	Malmer
Printed Name: Mar	γ R. Palmer	Title: Manager
Signature(s) on be	chalf of Other Business Entity:	See below for required signature(s).
Signature: <u>Ma</u>	uy Palmo	
Printed Name: Mar	y R. Palmer	Title: Manager
Signature:	MM/	
Printed Name: Cha	aries E. Palmer	Title: Manager
Ci amatana		
Signature:		Title:
i ilited i valie.		1740.
Signature:		
Printed Name:		Title:
C:		
Signature:		Title:
Printed Name		Tiue.
Signature:		
Printed Name:		Title:
If Florida Corpor	ation:	
	man, Vice Chairman, Director, or	Officer.
	cers have not been selected, an In	
	l Partnership or Limited Liabili	ty Partnership:
Signature of one G	eneral Partner.	
If Florida Limited	l Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL		
All others:		
Signature of an aut	horized person.	
Fees:		
Articles of	Conversion:	\$25.00
	orida Articles of Organization:	\$125.00
Certified C	-	\$30.00 (Optional)
Certificate		\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	EFFECTIVE DATE 4-10-2014
Central Florida Hardscapes, LLC	
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
39 Pinwheel Lane	39 Pinwheel Lane
Palm Coast, FL 32164	Palm Coast, FL 32164
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re	egistered agent are:
Mary R. Palmer	PR -
Name	
39 Pinwheel Lane	EE OF P
Florida street address (P.O.	Box NOT acceptable) FL 32164 FR 32164
Palm Coast	FL32164 55
City	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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Men	
"MGR" = Manager	Ohadas E. Dalassa
Manager	Charles E. Palmer 39 Pinwheel Lane
	Palm Coast, FL 32164
Manager	Mary R. Palmer
	39 Pinwheel Lane
	Palm Coast, FL 32164
	
	
	The second secon
(Use attachment if necessary CLE V: Effective date, if othe effective date is listed, the da	than the date of filing: 04/10/2014 (OPTIONAL). (OPTIONAL).
CLE V: Effective date, if othe effective date is listed, the da 90 days after the date of filing CLE VI: Other provisions, if a	than the date of filing: 04/10/2014
CLE V: Effective date, if othe effective date is listed, the da 90 days after the date of filing CLE VI: Other provisions, if a	than the date of filing: 04/10/2014 . (OPTIONAL te must be specific and cannot be more than five business date)
CLE V: Effective date, if othe effective date is listed, the da 90 days after the date of filing CLE VI: Other provisions, if a	than the date of filing: 04/10/2014
CLE V: Effective date, if othe effective date is listed, the da 90 days after the date of filing. CLE VI: Other provisions, if a CCCC REQUIRED SIGNATURE	than the date of filing: 04/10/2014 (OPTIONAL te must be specific and cannot be more than five business da) ny.
CLE V: Effective date, if othe effective date is listed, the da 90 days after the date of filing CLE VI: Other provisions, if a CLE VI: Other provisions, i	than the date of filing: 04/10/2014
CLE V: Effective date, if othe effective date is listed, the da 90 days after the date of filing CLE VI: Other provisions, if a CLE VI: Other provisions, i	than the date of filing: 04/10/2014 (OPTIONAL te must be specific and cannot be more than five business date) ny. **Doctor* member or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true and the penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of perjury that the facts stated herein are true. The penalties of penalties o
REQUIRED SIGNATURE Signature of a (In accordance with section 60: constitutes an affirmation under am aware that any false informationstitutes a third degree felony	than the date of filing: 04/10/2014 (OPTIONAL te must be specific and cannot be more than five business day) ny. Calman member or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. nation submitted in a document to the Department of State as provided for in s.817.155, F.S.)