## L15000/2320/

(Re	questor's Name)			
(Ād	dress)			
. (Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
		ļ		
WS-4	444-	_		





100274073771

06/23/15--01006 -023 \*\*155.00

SECRETARY OF STATE
TALLANASSEE, FLORIDA



1

## **COVER LETTER**

Divisio	on of Corpor	ations	•			
SUBJECT: _	M. £	Ε.	Lawn	SETY	10 <i>6</i> 5	r
(Name of Resulting Florida Limited Company)			)			

The enclosed Articles 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. 605.1045, F.S.

Please return all correspondence concerning this matter to:

TO: Registration Section

LAWN SETVICES INC (Firm/Company) Grant 11 33647-2932 (City, State and Zip Code)

E-mail Address: (to be used for future annual eport notifications)

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

Status

🗀 \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles

ui \$155 00 Filing Fees and Certificate of

1\$180.00 Filing Fees and Certified Copy

\$185 00 Filing Fees, Certified Copy, and Certificate of Status

of Organization)

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

INHS11 (02/15)

...



June 29, 2015

MAKI S. IPPOLITO 10244 GRANT CREEK DR TAMPA, FL 33647-2932

SUBJECT: M & E LAWN SERVICE INC

Ref. Number: W15000044411

We have received your document for M & E LAWN SERVICE INC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Incorporation, if any.

Can not list Registered Agent for a title.

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return the corrected original and one copy of 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) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 015A00013622

APPROVEE AND FILED

## Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

15 JUL 20 PM 3: 04

SECRETARY OF STATE
The Articles of Conversion and attached Articles of Organization are submitted to convert the following ALL AHASSEE. FLORIDA "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is  MEE. Lawn SERVICES TAC  (Enter Name of Other Business Entity)  PIS - 2476/
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
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  MEELAWN SERVICES LLC  (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 03-12-2015 03   16   2015 M.T (The effective date: 1) cannot be prior to date of receipt or filed date 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.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

Signed this 19 day of June	20_15	,	APPROVEL AND
Signature of Authorized Representative of Limi			FILED
Signature of Authorized Representative: All		rt Presiden # 1	1620 PH 3:04
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]	SEC	RETARY OF STATE
Signature: Alex Opents		TALLA	WHASSEE FLORIDA
Printed Name: NAK: TPION TO	Title: Pegister Agent	SECI TALK Presiden +	
Signature:Printed Name:			
Cimatura			
Signature:Printed Name:	_ Title:		
Signature:			
Printed Name:	_Title:		
Signature:			
Printed Name:			
Signature:			
Printed Name:			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.			
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:	,	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:		
All others: Signature of an authorized person.			
Fees:			
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)		

Page 2 of 2

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

APPROVEL AND FILED

ARTICLE 1 - Name:	•		
The name of the Limited Lial	oility Company is:		سد د
			15
MEE	LAWN SETVICES	<u> </u>	
	ewords "Limited Liability Company, "L.L.C.," or "L		5

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

10 244 Grant Creek Dr

Trampa FL 33647-2632 Trampa 71 33647-2932

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Maki S. IPPOLITO

Name

Name

Creek Dr.

10344 Grant Creek Dr Florida street address (P.O. Box NOT acceptable)

TAMPA FL 33647-2932
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.

(CONTINUED)

Page 1 of 2

Registered Agent's Signature (REQUIRED)

	ARTICLE IV- The name and address of each person a Company:	APPHOVEL AND FILED		
	<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	15 JUL 20 PH 3: 04	
	MGR	Maki S. IppoLiTo 10244 Grant Creek Dr TAMPA 71 33647-2932	SECRETARY OF STATE TALLAHASSEE PLORIDA	
	4800			
(If an to or 9 Note: 1	0 days after the date of filing.)	e specific and cannot be more than five business days pe applicable statutory filing requirements, this date will not be listed a		
ARTIO	CLE VI: Other provisions, if any.			
	REQUIRED SIGNATURE:	,		
1:	(In accordance with section 605.0205)  onstitutes an affirmation under the penalty	or an authorized representative of a member.  3), Florida Statutes, the execution of this document ties of perjury that the facts stated herein are true, mitted in a document to the Department of State ed for in s.817.155, F.S.)		
	Type	aki S. Ippulito ed or printed name of signlee Filing Fees		
	\$125.00 Filing Fee for Articles of \$ 30.00 Certified Copy (Optional	Organization and Designation of Registered Agent		