L17000187709

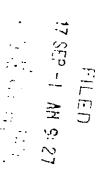
(Requestor	's Name)
(Address)	
(Address)	
(City/State/	Zip/Phone #)
PICK-UP	WAIT MAIL
(Business I	Entity Name)
(Document	Number)
Certified Copies C	Certificates of Status
Special Instructions to Filing C	fficer:

Office Use Only



300301752663

03/01/17--01002--002 **180.00



T. BURCH SEP _ 5 2017

COVER LETTER

TO:	New Filing Se Division of Co				
SHE	JECT: Garton LI	.c			
SUB	JEC1	(Name of Res	ulting Florida Limit	ed Com	pany)
					I fees are submitted to convert an "Othe cordance with s. 605.1045, F.S.
Pleas	e return all corre	espondence concerning	g this matter to:		
Collec	en Garton				
		(Contact Person)		•	
		(Firm/Company)		-	
PO B	ox 1643			_	
		(Address)			
Dune	din FL 34697				•
	((City, State and Zip Code)		-	
	nts@gartonconsult			_	
. E-	mail Address: (to b	e used for future annual re	port notifications)		
For f	urther information	on concerning this ma	tter, please call:		
Colle	en Garton		at (⁷²⁷	\487-13	334
₹,	(Name of Conta	ct Person)	(Area Code)) (Dayt	time Telephone Number)
		or the following amou a bank located in the		rocess	ed by this office must be payable in US
(\$25 f & \$12	50.00 Filing Fees for Conversion 5 for Articles ganization)	□S155.00 Filing Fees and Certificate of Status	■\$180.00 Filing and Certified Cop		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status
New Divis Clifte 2661	EET ADDRESS Filing Section Sion of Corporat on Building Executive Cent hassee, FL 3230	ions er Circle	New F Division P. O. F	iling Se on of Co Box 632	orporations [.]

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

FILED 17 SEP -1 AM S

The Articles 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.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Garton Inc
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a S Corp (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
February 7th 2013 On
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Garton LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.) 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.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 2	5th day of August	20 <u>17</u> .
Signature of	Authorized Representative of Lin	nited Liability Company:
Signature of	Authorized Representative:	De .
Printed Name	Colleen Garton	Title: Owner
		[See below for required signature(s)]
G:	<u> </u>	
Signature: Printed Name	· Colleen Garton	Title: President
i imea ivanie		
Signature:		
Printed Name	;	Title:
Ciamptuma		
Printed Name		Title:
Signature:		Title:
Printed Name	:	Title:
Cimatura		
Printed Name		Title:
Timed Name		
Signature:		
Printed Name	, 	Title:
	orporation: Chairman, Vice Chairman, Director, or r Officers have not been selected, an l	
	eneral Partnership or Limited Liab one General Partner.	ility Partnership:
	mited Partnership or Limited Liabi ALL General Partners.	lity Limited Partnership:
All others: Signature of a	an authorized person.	
Fees:		
Artic	les of Conversion:	\$25.00
	for Florida Articles of Organization:	•
	fied Copy:	\$30.00 (Optional)
Certif	ficate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
Garton LLC	
(Must contain the words "Limited Linb	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2086 Lakewood Drive	PO Box 1643
Cleanvater FL 33763	Dunedin FL 34697
(The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)	
The name and the Florida street address of the	e registered agent are:
United States Corporation Age	ents, Inc.
Nar	me
13302 Winding Oak Court Sui	te A
Florida street address (P.	O. Box NOT acceptable)
Tampa	FL 33612
City	Zip
Having been named as registered agent and	to accept service of process for the above stated limited

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..

Cheyenne Moseley, Asst. Secretary on behalf of United States Corporation Agents, Inc.
Registered Agent's Signature (REQUIRED)

(CONTINUED)

	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Colleen Garton
	2086 Lakewood Drive
	Clearwater FL 33763
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary) CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	or an authorized corresontative of a member
REQUIRED SIGNATURE: Signature of a member of this document is executed in accordance.	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statutes. I am aware the degree felorement to the Department of State constitutes a third degree felorement.
REQUIRED SIGNATURE: Signature of a member This document is executed in accorda any false information submitted in a do as provided for in s.817.155, F.S. Colleen Garton	or an authorized representative of a member nee with section 605.0203 (1) (b), Florida Statutes, I am aware the cument to the Department of State constitutes a third degree felo

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

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-