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(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:





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TADITAL C	CONNECTIO	N INC			
	Suite I • Tallahassee	•			
	800-342-8062 • Fax				
COAST NUR	SERY, LLC				
					
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Will Pick Up

COVER LETTER

TO:	New Filing S Division of C				
SUBJ	ECT: Suncoast	Nursery, LLC			
CDO		(Name of Re	sulting Florida Limi	ted Con	mpany)
The er Busine	nclosed Article ess Entity" into	s of Conversion, Artic o a "Florida Limited L	les of Organizati iability Company	on, an	nd fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	return all corr	espondence concernin	g this matter to:		
Robert	F. Greenc				
	 	(Contact Person)		-	
Greene	Hamrick Quinlar	a & Schermer, P.A.		_	
		(Firm/Company)			
601 12	th Street West			_	
		(Address)			
Braden	ton, Florida 3420			_	
	((City, State and Zip Code)			
E-m	nail Address: (to b	e used for future annual re	port notifications)	-	
For fu	rther informati	on concerning this ma	tter, please call:		
Robert	F. Greene		_at (747-1	1871
	(Name of Conta	ect Person)	(Area Code)	(Day	/time Telephone Number)
		or the following amou a bank located in the		rocess	sed by this office must be payable in US
(\$25 for & \$125	0.00 Filing Fees r Conversion for Articles nization)	S155.00 Filing Fees and Certificate of Status	■\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
New F Division Clifton	ET ADDRESS Tiling Section on of Corporat Building Executive Cent	ions	New Fi Divisio P. O. B	ling S n of C ox 632	Corporations

INHS11 (7/17)

Tallahassec, FL 32301

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles 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.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Suncoast Nursery, Inc. 1022924
(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 (Enter state, or if a non-U.S. entity, the name of the country)
May 24, 1979 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Suncoast Nursery, 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 /3 th day of November	20.17
Signat	ure of Authorized Representative of Limit	ed Liability Company:
Signatu Printed	Name: Robert F. Greene	Title: Authorized Representative
	ure(s) on behalf of Other Business Entity: [S	See below for required signature(s)]
Signatu Printed	Name: Ralph C. Garrison	Title: Vice President, Director
Signatu Printed	Name: Sandra C. Garrison	Title: President, Director
Signatu	ire:	Title
Signatu	ire:	
Printed	Name:	Title:
Signate Printed	Name:	Title:
Signatu Printed	nre:Name:	_ Title:
Signati	ida Cornoration: ure of Chairman, Vice Chairman, Director, or C ctors or Officers have not been selected, an Inc	
	ida General Partnership or Limited Liabilit ure of one General Partner.	y Partnership:
If Flor Signatu	ida Limited Partnership or Limited Liabilitures of ALL General Partners.	y Limited Partnership:
All oth Signatu	i <mark>ers:</mark> ire 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)

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	is:	
Suncoast Nursery, LLC		
(Must contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE H - Address:		
The mailing address and street address of the	principal office of the Limite	d Liability Company is:
Principal Office Address:	Mailing Address:	
6012 18th Ave E. Bradenton, FL 34208	6012 18th Ave E. Bradenton,	, FL 34208
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)	red Office, & Registered Agegistered Agent. You must designate an	ent's Signature: individual or another
The name and the Florida street address of the	ne registered agent are:	
Robert F. Greene, Esq.		
N	ame	
601 12th Street West		
	P.O. Box NOT acceptable)	
n. l		
Bradenton City	FL 34205 Zip	
City	£.ip	
Having been named as registered agent an liability company at the place designate registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as	d in this certificate, I hereby ac vacity. I further agree to comp ete performance of my duties, a	cept the appointment as ly with the provisions of all nd I am familiar with and
() h		****
Registered Agent's S	Signature (REQUIRED)	17 NO
(CONT	TINUED)	
		19 36 19 36

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Ralph C. Garrison	_
	6012 18th Ave E. Bradenton, FL 34208	_
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ICLE V: Other provisions, if any.		· 5.
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	: <u>21</u>	9

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Robert F. Greene

Typed or printed 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)