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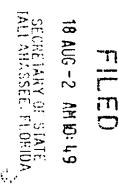
(Requestor's Name)
(Address)
(Address)
(Address) .
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

TO: New Filing S Division of C			
* · · · · · · · · · · · · · · · · · · ·	TAM	TREE	Corporation
		-	d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:	
Gerardo IAM TF	Mendez (Contact Person) 3EE "LLC (Firm/Company)	Rodriguez "	
3952 HL	enters Lak (Address)	e Circle W	
Jackson	Ville, FL 3221 City, State and Zip Code)	0	
gianalex. E-mail Address: (to b	ander 16 60 e used for future annual re	yahoo . com	
For further informati	on concerning this ma		118-0757
(Name of Conta	act Person)	(Area Code) (Day	time Telephone Number)
dollars and drawn on	a bank located in the	United States)	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	S185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES New Filing Section	S:	MAILING A New Filing S	

Division of Corporations

Tallahassee, FL 32314

P. O. Box 6327

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

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: I ANI TREE CORPORATION 1 117-85177
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Cov QCO TOV (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on UCTOBER, 23, 2017. (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: I AN TREE Service "LLC"
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 10-23-17
(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 Rusiness Entity" has agreed to pay any members baying appraisal rights the amount of

- 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 I day of November	20	
Signature of Authorized Representative of Limi	ited Liability Company:	
Signature of Authorized Representative: Gernated Name: 60,0100 mende 5	rardo Niendez Rodriguez Tillo: <u>Owner</u>	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	
Signature: <u>6000000000000000000000000000000000000</u>	Til. 0/1000	
Frinted Name: 6 2 rar do mismuse	Title: Dwiler	
Signature:Printed Name:		
Printed Name:	Title:	
Signature:Printed Name:		
Printed Name:	Title:	
Signature:		
Signature: Printed Name:	Title:	
Signature:		
Signature:Printed Name:	Title:	
Signature:		
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.		
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.	18 AUG SEGRETA MALLAHAS	lan.
Fees:	33.55 ~	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	חד

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:
Must contain the words "Limited Liability 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:
3186 White Heron Trail O.P. FL 32073 Lake Circle W Jacksonville FL, 32210
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:
Cerardo Mendez.
3952 Hunters Lake Circle W Florida street address (P.O. Box NOT acceptable)
Jackson Ville FL 32210 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
Geraldo mended
Registered Agent's Signature (REQUIRED) (CONTINUED) Registered Agent's Signature (REQUIRED) (CONTINUED)

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

Title:	Name and Address:
"AMBR" = Authorized Member	
'MGR" = Manager	Ilianita Rivera
	3186 White Heron Trail
	O.P. FU 32013
MGR	
	TI SEC
Use attachment if necessary)	A Co
	ASS SSS
EV: Other provisions, if any.	्या - श्री म्यू
	09A 418
REQUIRED SIGNATURE:	4n 2
STORY OF THE STORY	
Geraldo mendeto	
Signature of a member or a	an authorized representative of a member
any false information submitted in a document	with section 605.0203 (1) (b), Florida Statutes, I am awar- nent to the Department of State constitutes a third degree:
as provided for in s.817.155, F.S.	a special state constitutes a time degree
igcap	Mo Merclez Rodriguez ped or printed name of signee
Geraro	O P-OOITENUEC
Typ	ped or printed name of signee