

L19000162093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

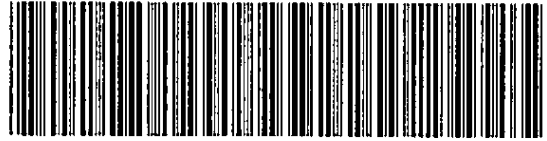
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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JUL 02 2019



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05/06/19--01037--028 \*\*185.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
19 JUL -1 AM 8:43  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 15, 2019

LAZARO LEAL PADILLA  
8224 DONALDSON DR  
TAMPA, FL 33615

2019 JUN -7 AM 11:15

SUBJECT: LAZARO LEAL LANDSCAPING AND TREE SERVICES, LLC.  
Ref. Number: W19000047660

We have received your document for LAZARO LEAL LANDSCAPING AND TREE SERVICES, LLC. and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

The name of the entity must be identical throughout the document.

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document. We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return 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.

Keyna E Page  
Regulatory Specialist II

Letter Number: 719A00009764



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 10, 2019

LAZARO LEAL PADILLA  
8224 DONALDSON DR  
TAMPA, FL 33615

SUBJECT: LAZARO LEAL LANDSCAPING AND TREE SERVICES, LLC.  
Ref. Number: W19000047660

We have received your document for LAZARO LEAL LANDSCAPING AND TREE SERVICES, LLC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must contain the name of the limited liability company as set forth in the attached articles of organization.

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document. We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return 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.

Keyna E Page  
Regulatory Specialist II

Letter Number: 819A00011504

2019 JUL -1 AM 11:32

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Lazaro Leal Landscaping and Tree Services, LLC  
(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:

Lazaro Leal Padilla

(Contact Person)

Lazaro Leal Landscaping and Tree Services

(Firm/Company)

8224 Donaldson Dr

(Address)

Tampa, Florida 33615

(City, State and Zip Code)

leallandscapingservices@yahoo.com

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

For further information concerning this matter, please call:

Lazaro Leal Padilla at (813) 451-4328

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☐ \$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

☒ \$185.00 Filing Fees,  
Certified Copy, and  
Certificate of Status

**STREET ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

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:

Lazaro Leal Landscaping and Tree Services, Inc.

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a Incorporation P14-92612

(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of Florida

(Enter state, or if a non-U.S. entity, the name of the country)

on 11/06/2014

(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Lazaro Leal Landscaping and Tree Services, 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.

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
19 JUL - 1 AM 8:44  
TALLAHASSEE, FLORIDA

Signed this 30 day of April 2019

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: [Signature]  
Printed Name: Lazaro Leal Padilla Title: Owner

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature: [Signature]  
Printed Name: Lazaro Leal Padilla Title: Chairman

Signature: [Signature]  
Printed Name: Migdalena Godoy Capdevilla Title: Officer

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida Corporation:**

Signature of Chairman, Vice Chairman, Director, or Officer.  
If Directors or Officers have not been selected, an Incorporator must sign.

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**All others:**

Signature of an authorized person.

**Fees:**

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
19 JUL - 1 AM 8:44  
TALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Lazaro Leal Landscaping and Tree Services, LLC.  
(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:

8224 Donaldson Dr  
Tampa, FL 33615

Same as Principal Office

### 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:

Lazaro Leal Padilla  
Name

8224 Donaldson Dr  
Florida street address (P.O. Box **NOT** acceptable)  
Tampa FL 33615  
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)

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
19 JUL -1 AM 8:44  
TALLAHASSEE, FLORIDA

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

MGR/MGRM.

**Name and Address:**

Lazaro Leal Padilla  
8224 Donaldson Dr  
Tampa, FL 33615

Lazaro Leal Padilla  
8224 Donaldson Dr  
Tampa, FL 33615

(Use attachment if necessary)

**ARTICLE V: Other provisions, if any.**

**REQUIRED SIGNATURE:**

[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.

Lazaro Leal Padilla

Typed or printed name of signer

**Filing Fees**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent  
\$ 30.00 Certified Copy (Optional)      \$ 5.00 Certificate of State (Optional)

19 JUL - 1 4:08:44  
DIVISION OF  
STATE  
CORPORATION  
ALLAHASSEE, FLORIDA