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(Requestor's Name)							
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PICK-UP WAIT MAIL							
(Duninger Estity Name)							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MA'

W21-159



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 9, 2021

TRACEY C HIGGINBOTHAM HIGGINBOTHAM COMPANIES INC 3790 N US 1 COCOA, FL 32926

SUBJECT: THE WRIGHT GARDENER LLC

Ref. Number: W21000015926

SECNLIAKT W STATE
TALLAHASSEE, FLORIDA

We have received your document for THE WRIGHT GARDENER LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 321A00002852

COVER LETTER

TO:	New Filing Se Division of Co				
SHR	IFCT. THE WRI	GHT GARDENER LLC			
501			sulting Florida Lim	ited Com	pany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Pleas	e return all corre	spondence concernin	g this matter to:		
TRAC	CEY C HIGGINBO	THAM			
_	-	(Contact Person)		_	
HIGG	INBOTHAM COM	PANIES INC			
		(Firm/Company)		_	
3790	N US 1				
		(Address)		_	
coc	OA FL 32926				
	(C	ity, State and Zip Code)		_	
TCHI	GGINBOTHAM @	HIGCOINC.COM			
E-1	mail Address: (to be	used for future annual re	port notifications)	_	
For fi	urther informatio	on concerning this ma	tter, please call:		
TRAC	EY C HIGGINBO	THAM	_at (<u>321</u>	632-5	726
	(Name of Contac	et Person)	(Area Code	(Day	time Telephone Number)
		or the following amou a bank located in the		process	ed by this office must be payable in US
(\$25 fo & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Addr				Address:
New Filing Section Division of Corporations P.O. Box 6327				New Filing Section Division of Corporations	
					entre of Tallahassee
	Tallahassee, F				N. Monroe Street, Suite 810

Tallahassee, FL 32303

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: THE WRIGHT GARDENER INC
(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
08/10/2007
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
THE WRIGHT GARDENER 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

21 HAR -8 FH 6: 83

Signed this 87H day of JANUARY	_20_ <i>21</i>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Ann. Printed Name: JAMES WRIGHT	Title: AUTHORIZED MEMBER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature:	Title: DIR
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	
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 Liability 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.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

21 MAR -8 PH 6: 50 SECRETARITY OF STATE TALL ARMSSEE OF ORDER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

THE WRIGHT GARDENER LLC		
	ited Liability Company, "L.L.C.," or "LLC.")	
ADTICLE		
ARTICLE II - Address:	of the principal office of the Limited Lightlity Compa	ny io
The maining address and street address	of the principal office of the Limited Liability Compa	шу 15.
Principal Office Address:	Mailing Address:	
6715 CEDAR AVENUE	6715 CEDAR AVENUE	
COCOA FL 32927	COCOA FL 32927	
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another	
(The Limited Liability Company cannot serve as its	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are:	
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are:	
(The Limited Liability Company cannot serve as its business entity with an active Florida registration. The name and the Florida street address	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are:	
(The Limited Liability Company cannot serve as its business entity with an active Florida registration. The name and the Florida street address	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are:	٦. ال
The Limited Liability Company cannot serve as its business entity with an active Florida registration. The name and the Florida street address JAMES WRIGHT 6715 CEDAR AVEN	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: Name UE	FILED
The Limited Liability Company cannot serve as its business entity with an active Florida registration. The name and the Florida street address JAMES WRIGHT 6715 CEDAR AVEN	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: Name Name	FILED

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)

ARTICLE IV-

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		
AMBR, MGR	JAMES WRIGHT	
	6715 CEDAR AVENUE	
	COCOA FL 32927	
		<u></u>
		
		
		THE N
(Use attachment if necessary)		
•		AND
RTICLE V: Other provisions, if any.		8
,	<u></u>	
		<u>6.</u>
		> W

<u>REQUIRED Ş</u>IGNATURE:

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.

JAMES WRIGHT

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)