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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
G/L1
W2100069598

Office Use Only



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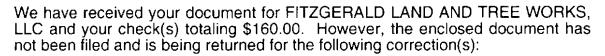
FLORIDA DEPARTMENT OF STATE Division of Corporations

May 18, 2021

DYLAN FITZGERALD 8590 S FLORIDA AVE FLORAL CITY, FL 34436

SUBJECT: FITZGERALD LAND AND TREE WORKS, LLC

Ref. Number: W21000069598



We are enclosing the proper form(s) with instructions for your convenience.

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.

Matthew T Moon
Regulatory Specialist II Supervisor

Letter Number: 921A00010462

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COVER LETTER

TO: New Filing S Division of C							
SUBJECT:	Fit	Zyerald L	and und	tree	works	LLC	
· · · · · · · · · · · · · · · · · · ·	(Name of Res	ulting Florida Lir	nited Company)				
	s of Conversion, Artic o a "Florida Limited Li						r
Please return all corr	espondence concernin	g this matter to	;				
Dylan	(Contact Person) end Land and (Firm/Company)		-				
Filly	enald Land and	, tree work	es, cu			_ ^2	
	(Firm/Company)		_			2021 JUN 4 AM 6: 18	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
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floral City	FL, 39956 City, State and Zip Code)					mr 🗷	1.1
(City, State and Zip Code)		<u>—</u>			F. 0	£.,
FitZgerald	land and thee document of the used for future annual re	D. GMail.	017			명원 :	
E-mail Address: (to b	oe used for future annual re	port notifications)	<u> </u>				
For further informati	ion concerning this ma	tter, please call	:				
Name of Cont	· tzger ald	at (<u>35 Z</u> (Area Coo) 46 4: le) (Daytime T	-0 051 Telephone N	Number)		
	for the following amou a bank located in the		processed by	y this offic	ce must be	payable in US	
	☐S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified C	ng Fees Certi	185.00 Filin ified Copy, ificate of S	, and		
Mailing Add			Street Add				
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Division of C P.O. Box 633	-		Division of The Centre	•			
Tallahassee,			2415 N. M			310	

Tallahassee, FL 32303

Articles of Conversion

For

"Other Business Entity"

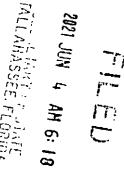
Into

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:
Fitzgerald Land and tree WONKS, LLG (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a COPPORATION
(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 10/13/200 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Fitigerald Land and Tree works, LL6. (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 6-1-2021 (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.
MILLAHASSEE, T

Signed this 15+ day of June	_ 20_2 \
Signature of Authorized Representative of Limi	
Signature of Authorized Representative: Printed Name: Dylan Etgerald	
Printed Name: Dylan Estigerala	Title: OWNER
Signature(s) on behalf of Other Business Entity:	
Signature:Printed Name:	
Printed Name:	Title:
0.	
Signature:Printed Name:	Title
Timed Name	
Signature:	
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 In-	
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	- <u>-</u>
If Florida Limited Partnership or Limited Liabili	ty Limited Partnershin:
Signatures of <u>ALL</u> 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)



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

F. + Tgerald Land and Tree Works, LLG
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE I - Name:

The name of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
8540 S flor.da que fural City Fl, 34456	\$590 S florida ave floral city FI, Jings6
	egistered Office. & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another
	os of the registered agent are:
The name and the Florida street address	as of the registered agent are.
	•
	FAzgerald Name

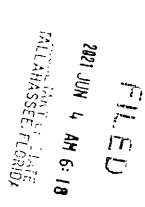
Florida street address (P.O. Box NOT acceptable)

floral City FL 34436

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:

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
A. 0 D	
MGR	Dylan fitzgerald
	floral city zun36
	- +10001 (114 34426
	2821
(Use attachment if necessary)	ZBZ1 JUN
	SS =
TICLE V: Other provisions, if any.	in A
	© m ∞
REQUIRED SIGNATURE:	
<u>iniquinip</u> signification.	2
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony
	0/10
Ту	ped 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)