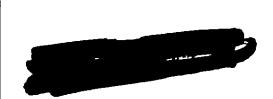
# 

(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:

Office Use Only







2022 - 3 Fii 3: 10

November 30, 2022

JACQUELINE ACEVEDO 22095 US HWY 19 N CLEARWATER, FL 33765

SUBJECT: IBARRA LANSCAPE LLC

Ref. Number: W22000140727

We have received your document for IBARRA LANSCAPE 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):

You must type the complete/legal name of the individual(s) signing the document in each signature block.

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.

ARCEDRA JOHNSON Regulatory Specialist II

SECRETARY OF STANDARY OF STAND



November 30, 2022

JACQUELINE ACEVEDO 22095 US HWY 19 N CLEARWATER, FL 33765

SUBJECT: IBARRA LANSCAPE LLC

Ref. Number: W22000140727

We have received your document for IBARRA LANSCAPE 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):

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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.

ARCEDRA JOHNSON Regulatory Specialist II

www.sunbiz.org

Letter Number: 122A00025019



### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 8, 2022

JACQUELINE ACEVEDO

CLEARWATER, FL 33765

SUBJECT: IBARRA LANSCAPE LLC

Ref. Number: W22000140727

We have received your document for IBARRA LANSCAPE 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):

You must type the complete/legal name of the individual(s) signing the document in each signature block.

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 (850) 245-6052.

ARCEDRA JOHNSON Regulatory Specialist II

Letter Number: 122A00025019

### **COVER LETTER**

TO: New Filing Section Division of Corporations			
SUBJECT: IBARRA LANDSCAPE INC			
(Name of Re	esulting Florida Lim	ted Company)	_
The enclosed Articles of Conversion, Arti Business Entity" into a "Florida Limited I			
Please return all correspondence concerning	ng this matter to:		
Jacqueline Acevedo			
(Contact Person)		-	
JASASTSA BUSINESS SERVICES LLC			-
(Firm/Company)		_	
22095 US HWY 19 N			
(Address)		_	
CLEARWATER, FLORIDA 33765			
(City, State and Zip Code)		_	
AUCLEARWATER@GMAIL.COM			₹s N
E-mail Address: (to be used for future annual r	report notifications)	-	CCR R
For further information concerning this m	atter, please call:		22 NOV -2 AM 9:1 SECRETARY OF STATALLAHASSEE, 11 00
JACQUELINE ACEVEDO	at ( <u></u>	)645-2856	2 2 3388 0 A20
(Name of Contact Person)	(Area Code	) (Daytime Telephone Number	
Enclosed is a check for the following amo dollars and drawn on a bank located in the	ount: (All checks e United States)	processed by this office mus	st be payable <b>页</b> US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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: IBARRA LANDSCAPE INC	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, or	etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the name of the country)	
October 11th, 2018	
(date of organization, formation or incorporation)	
(date of organization, formation or incorporation)  3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Granization (BARRA LANDSCARE LLC)	<u> </u>
BARRA LANDSCAPE ELC	
(Enter Name of Florida Limited Liability Company)	F
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 locument'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.

718000855/2

Signed this 28TH day of OCTOBER	20_22
Signature of Authorized Representative of Lim	
Signature of Authorized Representative:	Title: PRESIDENT
Signature(s) on behalf of Other Business Entity:	
Signature: Manalico Tienes Cultural Printed Name: MARCELINO IBARRA GUTIERREZ	Title: PRESIDENT
Signature:Printed Name:	
Printed Name:	Title:
Signature:	
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 In	Officer.  Corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	tv Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Fees for Florida Articles of Organization:

Certified Copy:

Certificate of Status:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
IBARRA LANDSCAPE LLC (Must contain the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10535 CAMELIA DR PORT RICHEY, FL 34668	10535 CAMELIA DRIVE PORT RICHEY, FL 34668
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the registration.	ered Agent. You must designate an individual or another
JASASTSA BUSINESS SERV Name	· · · · · · · · · · · · · · · · · · ·
22095 US HWY 19 N	SE SE
Florida street address (P.O.	Box NOT acceptable)
CLEARWATER	Box NOT acceptable)  FL 33765  Zip  Zip  Zip  Zip  Zip  Zip  Zip  Zi
City	Zip Te
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	

### 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		
AMBR	MARCELINO IBARRA GUTIERREZ	
<del></del>	10535 CAMELIA DRIVE	
	PORT RICHEY, FLORIDA 34668	
<del></del>		
(Use attachment if necessary)		
(ose addennen ir necessary)		
	_	
TICLE V: Other provisions, if any.	SE SE	્
		٠ع
	Tm S	<u> </u>
	<u>SŞ</u> _K	<del>'</del>
(REQUIRED SIGNATURE:	ma, r	June 1
	619	
Manilya	Ibing buhery	äh, ,
		_ n
Signature of a member or a	an authorized representative of a member	
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware tha	11
any false information submitted in a docume as provided for in s.817.155, F.S.	nent to the Department of State constitutes a third degree felon	ıy
as provided for in s.et 7.133, 17.3.	·	
MARCELINO IBARRA GUTIERREZ		

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)

### **COVER LETTER**

Division of Corpor					
SUBJECT: IBARRA LAND	SCAPE INC				
30biEC1	(Name of Resu	lting	Florida Limi	ted Con	npany)
					d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all correspond	dence concerning	this	matter to:		
Jacqueline Acevedo					
(Cor	ntact Person)			-	
JASASTSA BUSINESS SER	VICES LLC				-
(Fir	m/Company)		·	-	
22095 US HWY 19 N					
	(Address)			-	
CLEARWATER, FLORIDA 33	•				
(City, St	ate and Zip Code)			-	
AUCLEARWATER@GMAIL.	COM				
E-mail Address: (to be used	for future annual repo	rt no	tifications)	-	
For further information cor	ncerning this matt	er, p	lease call:		
JACQUELINE ACEVEDO		at (	727	645-2	856
(Name of Contact Perso	on)	\.	(Area Code)	(Day	856 time Telephone Number)
Enclosed is a check for the dollars and drawn on a bank	_		-	rocess	ed by this office must be payable in US
-	ertificate of		180.00 Filing Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323				New F Division The Co	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

INHS11 (7/17)

### **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: IBARRA LANDSCAPE 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 Florida
(Enter state, or if a non-U.S. entity, the name of the country)
October 11th, 2018 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:
IBARRA LANDSCAPE 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.



# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
IBARRA LANDSCAPE LLC	
(Must contain the words "Limited Liability Com	pany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the princip	al office of the Limited Liability Company is:
Principal Office Address: Ma	ailing Address:
10535 CAMELIA DR 105	535 CAMELIA DRIVE
PORT RICHEY, FL 34668	RT RICHEY, FL 34668
(The Limited Liability Company cannot serve as its own Registered A, business entity with an active Florida registration.)  The name and the Florida street address of the registed JASASTSA BUSINESS SERVICES  Name  22095 US HWY 19 N  Florida street address (P.O. Bayer)	ered agent are:
Florida street address (P.O. Box CLEARWATER	• •
City	Zip
Having been named as registered agent and to accelliability company at the place designated in this cregistered agent and agree to act in this capacity. It is statutes relating to the proper and complete performaccept the obligations of my position as registered. Registered Agent's Signature (CONTINUED)	pt service of process for the above stated limited sertificate, I hereby accept the appointment as further agree to comply with the provisions of almance of my duties, and I am familiar with and agent as provided for in Chapter 605, F.S

Title:	Name and Address:
'AMBR" = Authorized Member 'MGR" = Manager	
AMBR	MARCELINO IBARRA GUTIERREZ
<del></del>	10535 CAMELIA DRIVE
	PORT RICHEY, FLORIDA 34668
<del></del>	
Use attachment if necessary)	

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.

MARCELINO IBARRA GUTIERREZ

(REQUIRED SIGNATURE:

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)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	MARCELINO IBARRA GUTIERREZ
	10535 CAMELIA DRIVE
	PORT RICHEY, FLORIDA 34668
(Use attachment if necessary)  TICLE V: Other provisions, if any.	
•	
•	
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that nent to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that nent to the Department of State constitutes a third degree felony
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance any false information submitted in a docum as provided for in s.817.155, F.S.  MARCELINO IBARRA GUTIERREZ	with section 605,0203 (1) (b) Florida Statutes, Lam aware that

### **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:  IBARRA LANDSCAPE 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
(Enter state, or if a non-U.S. entity, the name of the country)
October 11th, 2018
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: IBARRA LANDSCAPE 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 28TH day of OCTOBER	20_22
Signature of Authorized Representative of Limi	
Signature of Authorized Representative:	Title: PRESIDENT
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Sim Who has They between	
Signature: Manelino Thing byhem. Printed Name: MARCELINO IBARRA GUTIERREZ	Title: PRESIDENT
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	
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 Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
Signatures of ALL General Farmers.	
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy:	\$25.00 \$125.00 \$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Company, "L.L.C.," or "LLC.")		
ncipal office of the Limited Liability Company is:		
Mailing Address:		
Maning Address.		
10535 CAMELIA DRIVE		
PORT RICHEY, FL 34668		
Office, & Registered Agent's Signature: ed Agent. You must designate an individual or another		
gistered agent are:		
CES LLC		
520 220		
NOT III		
Box NOT acceptable)		
FL <sup>33765</sup>		
Zip		
accept service of process for the above stated limited his certificate, I hereby accept the appointment as w. I further agree to comply with the provisions of all orformance of my duties, and I am familiar with and stered agent as provided for in Chapter 605, F.S ture (REQUIRED)		

### **COVER LETTER**

Division of Co						
SUBJECT: IBARRA I	ANDSCAPE INC					
30 <b>5</b> 02011	(Name of Res	ulting Florid	a Limite	d Con	npany)	
					d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.	
Please return all corre	spondence concerning	g this matte	er to:			
Jacqueline Acevedo						
	(Contact Person)					
JASASTSA BUSINESS	SERVICES LLC				•	
	(Firm/Company)					
22095 US HWY 19 N						
	(Address)					
CLEARWATER, FLORI	DA 33765					
(C	ity, State and Zip Code)					
AUCLEARWATER@GI	•					
E-mail Address: (to be	used for future annual rep	ort notificat	ions)			
Car further information		**** *****	aalla			
For further information	•	-				
JACQUELINE ACEVED	<u> </u>	_at ( <u>727</u>	)	645-2		
(Name of Contac	t Person)	(Area	Code)	(Day	time Telephone Number)	
Enclosed is a check for dollars and drawn on				ocess	sed by this office must be payable in US	
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 and Certifi			☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Addr					Address:	
				New Filing Section		
•			Division of Corporations The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314