# 1230003/3446

	(Requesto	r's Name)	
	(Address)		
	(Address)		
	(		
	(City/State	/Zip/Phone #)	
PICK-UF		WAIT	MAIL
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	(Business	Entity Name)	
	(Documen	t Number)	
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Special Instructions to	Filing Office	:ег:	

Office Use Only



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SECRETARY OF STATE

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## Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 07/05/2023	-	₩WALK IN*
ENTITY NAME Power F	Plant Landscaping Services, LLC	
DOCUMENT NUMBER_		
	**PLEASE FILE THE ATTACHED AND RETURN**	
xxxxxx	Plain Copy	
	Certified Copy Certificate of Status	
**/ 	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**  Certified Copy of Arts & Amendments  Certificate of Good Standing	
	**APOSTILLE' / NOTARIAL CERTIFICATION**	-
COUNTRY OF DESTINAT NUMBER OF CERTIFICA		<del></del>
TOTAL OWED \$150	ACCOUNT #: 120160000072	2
Please call Tina at th	the above number for any issues or concerns. Thank you so	much!

#### **Articles of Conversion**

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

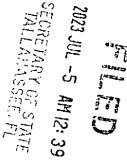
The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  Power Plant Landscaping Services, 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, et
First organized, formed or incorporated under the laws of
on February 1, 2008 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization Power Plant Landscaping 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.



Signed this day of	20
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative:  Printed Name: Alex M. Kaminski	
Signature of Authorized Representative:	2.64
Printed Name: Alex M. Kaminski	Title: Authorized Agent
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
a: Auch Lalden	
Signature: <u>Jack Labko</u> Printed Name: Jack Labko	Title: Officer
Frinted Name: Buck Edbito	
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Tide
Printed Name:	11116:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Simetura	
Signature: Printed Name:	Title:
Titlifed (valie	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	ity Partnership
Signature of one General Partner.	tty farthership.
Signature of one Seneral Parties.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
A.W	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
	\$125.00
	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.  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)



### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Con	npany is:
Power Plant Landscaping Services, LLC	
(Must contain the words "Lim	ited Liability Company, "L.L.C.," or "LL.C.")
ARTICLE II - Address:	gate the test of the Limited Lightlity Company is
Principal Office Address:	of the principal office of the Limited Liability Company is  Mailing Address:
-	
Principal Office Address:	Mailing Address:

business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Corporate Creations Networ	k Inc.
Nar	me
801 US Highway 1	
Florida street address (P.	O. Box NOT acceptable)
North Palm Beach	FL <sup>33408</sup>
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.

Jenisa Irizarry, Special Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Jenisa Irizarry, Special Secretary

SECRETARY

ANALYTICAL

ANALYTICAL

SECRETARY

SECRETARY

ANALYTICAL

SECRETARY

SEC

ARTICLE IV-	
The name and address of each person authorized to manage and control the Limited Liab	oility
Company:	

GL FL Holdings LLC
950 Airport Rd.
Lakewood, NJ 08701
Lakewood, NS 00701
The Amile
n authorized representative of a member

as provided for in s.817.155, F.S.

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)