L23000337257

(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:				



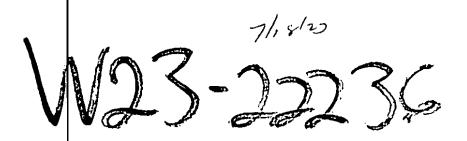
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FILED
SECRETARY OF STATE
FALLAHASSEE, FLORID

Office Use Only



COVER LETTER

TO: New Filing Section Division of Corporat	ions			
SUBJECT: B and R TreeOp	tics Service LLC			
30B3EC1.		ting Florida Lim	ited Com	pany)
		-		d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all correspond	ence concerning	this matter to:		
Joseph B Hahn				
(Cont	act Person)		_	
B and R Tree Service INC				
(Firm	/Company)		_	
203 Duval Street NE				
(<i>f</i>	Address)		_	
Live Oak, FL 32064				
(City, Sta	te and Zip Code)	•		
jbhahnmanagement@gmail.co	om			
E-mail Address: (to be used for	or future annual repo	ort notifications)		
For further information con-	cerning this matte	er, please call:	:	
Joseph B Hahn		at (386	209-8	3513
(Name of Contact Perso	n)	(Area Code	e) (Day	time Telephone Number)
Enclosed is a check for the todollars and drawn on a bank	-	•	process	ed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$15 and Ce Status	5.00 Filing Fees entificate of	☐\$180.00 Filin and Certified Co		■\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address:			Street	Address:
New Filing Section				Filing Section
Division of Corporat	tions			on of Corporations
P.O. Box 6327	1.4			entre of Tallahassee
Tallahassee, FL 323	14			N. Monroe Street, Suite 810 nassee, FL 32303
			Landi	1033CC, 1 L 343UJ



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February 17, 2023

JOSEPH BRANCE HAHN 11982 176TH STREET MCALPIN, FL 32062

SUBJECT: B AND R TREEOPTICS SERVICE LLC

Ref. Number: W23000022236

We have received your document for B AND R TREEOPTICS SERVICE 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):

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.

Letter Number: 123A00003939

DANIEL L O'KEEFE Regulatory Specialist II

www.sunbiz.org

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

SECRETARY OF STATE TALLAHASSEE, FLORIDA

2023 HAR 31 PM 2:38

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: B and R Tree Service Inc
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation P22-76822
(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 4, 2022 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:
B and R TreeOptics Service LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: Tan 22 7023. (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 22 day of January	20_ _23
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name: Joseph B Hahn	Brance Hah Title: O.M.
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Brance Hal	1-72-2023
Signature: Brance Hahn Printed Name: Toseph Brance Hahn	_ Title: Owner Manager
	· · · · · · · · · · · · · · · · · · ·
Signature: Printed Name:	Title:
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Interpretation of Control o	corporator must sign.
Signatures of ALL General Partners.	y Ennited I arthership.
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	y is:	
B and R TreeOptics Service LLC		
(Must contain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of th	e principal office of the Limited Liab	ility Company is:
Principal Office Address:	Mailing Address:	
203 Duval Street NE	11982 176th Street	
Live Oak, FL 32064	MCAlpin, FL 32062	
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own F business entity with an active Florida registration.)	ered Office, & Registered Agent's S Registered Agent. You must designate an individue	ignature: al or another
The name and the Florida street address of t	he registered agent are:	70 FA
Joseph Brance Hahn		SECRET
N	ame	ETAR AHAS
11982 176th Street		——————————————————————————————————————
Florida street address (P.O. Box NOT acceptable)	五 五 五 二 二 二 二 二 二 二 二 二 二 二 二 二 二 二 二 二
McAlpin	FL ³²⁰⁶²	DATE ORIENTALE
City	Zip	9 #

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-

Joseph Brance Hahn

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		
O.M	Joseph B Hahn	
	11982 176th Street	
	McAlpin, FL 32062	
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		一萬年
		HASSIE TEOMS AR 31 PH 2: 39
		- 공
(Use attachment if necessary)		2: 39
		9
TICLE V: Other provisions, if any.		
REQUIRED SIGNATURE:		
_ Q. Brance	Hahr 1-22-2023	
	1-22-102)	
gnature of a member or a	nn authorized representative of a member	
rius document is executed in accordance v	with section 605.0203 (1) (b), Florida Statutes. I am aware nent to the Department of State constitutes a third degree if	that
and these intollinguous sublininger in a ficility	ICH IO HIC DEDAITIDEN OF STATE CONCUDITOR A Invest document	Olony

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)