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PICK-UP	■ WAIT	MAIL
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Special Instructions to Fi	iling Officer:	
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COVER LETTER

Division of Corpo				
SUBJECT: The Tree Am	igos Outdoor Service	es, LLC		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Name of Resi	ulting Florida Limit	ed Con	pany)
		_		d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all correspo	ondence concerning	g this matter to:		
Mark D. Oaks				
((Contact Person)		•	
Shepherd Law, LLC				
(1	-irm/Company)		=	
2970 Peachtree Road, Suit	te 621			
-	(Address)		-	
Atlanta, GA 30305				
(City,	State and Zip Code)		•	
moaks@shepherdlaw.net				
E-mail Address: (to be use	ed for future annual rep	oort notifications)	-	
For further information c	concerning this mat	ter, please call:		
Jim Proctor III		_at (_\ 545-7	150
(Name of Contact Pe	erson)	(Area Code)	(Day	time Telephone Number)
Enclosed is a check for the dollars and drawn on a base.	_	•	rocess	ed by this office must be payable in US
(\$25 for Conversion and	\$155.00 Filing Fees d Certificate of atus	S180.00 Filing and Certified Cop		\$185.00 Filing Fees. Certified Copy, and Certificate of Status
Mailing Address			Street	Address:
New Filing Section				iling Section
Division of Corpo	orations			on of Corporations
P.O. Box 6327 Tallahassee, FL 3	32314			entre of Tallahassee N. Monroe Street, Suite 810
rananassee, the s			- 1171	TO A STANDARD CONTROLL CONTROL CONTROL CONTROL CONTROL CO

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 Tree Amigos Outdoor 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, etc.)
(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)
(Enter state, or if a non-U.S. entity, the name of the country)
April 7,2003 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: The Tree Amigos Outdoor 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 20 day of October	
Signature of Authorized Representative of Limi	ited Liability Company:
Signature of Authorized Representative: Printed Name: (Ames O. Pacs Tok	Title: Sec Theam
Signature(s) on behalf of Other Business Entity:	
Signature: MAN Printed Name: Stephen Cont Melson TV	Title: president
Signature:	, <u></u>
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
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 Liabili Signature of one General Partner.	ty 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: 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 is:	
The Tree Arnigos Outdoor Services, 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:
5000-18 Highway 17 Suite 235	5000-18 Highway 17 Suite 235
Fleming Island, FL 32003	Fleming Island, FL 32003
The name and the Florida street address of the r Jim Proctor Name	
	•
5000-18 Highway 17 Florida street address (P.O	. Box NOT acceptable)
Fleming Island	FL 32003
City	Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	o accept service of process for the above stated limited a this certificate. I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 605, F.S

(CONTINUED)

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

"AMBR" = Authorized Member	
MA ACTION B. A.	
"MGR" = Manager AMBR	TAOS Holdings, Inc., Jim Proctor Secretary
Alvion	5000-18 Highway 17
	Fleming Island, FL 32003
	Tioning toland, i e occor
(Use attachment if necessary) LE V: Other provisions, if any,	
(Use attachment if necessary) LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
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LE V: Other provisions, if any.	<u></u>
LE V: Other provisions, if any.	
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ELE V: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware t
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	e with section 605.0203 (1) (b), Florida Statutes. I am aware t ament to the Department of State constitutes a third degree fel
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