# L2400 290370

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

Office Use Only



### Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

# incserv

#### ORDER FORM

TO Florida Department of State

> The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM Melissa Moreau

mmoreau@incserv.com

850.656.7953

REQUEST DATE 6/27/2024

**PRIORITY** Expedite

OUR REF # (Order, ID#) 1267010

**ORDER ENTITY** 

**BLACK GOLD COMPOST COMPANY** 

## PLEASE PERFORM THE FOLLOWING SERVICES:

BLACK GOLD COMPOST COMPANY (FL)

File the attached conversion and subsquent articles of organization and provide a certified copy and certificate of status

NOTES:

\$185.00 Authorized

#### **RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Page 1 of 1 Thursday, June 27, 2024

#### COVER LETTER

| TO: New Filing S<br>Division of C   |   |                                       |             |  |                                       |  |
|---|---|---------------------------------------|-------------|--|---------------------------------------|--|
|   | old Compost Company.                                  | LLC                                   |             |  |                                       |  |
| <u></u>   |   | sulting Florida Li                    | mited Cc    | onipany)   | <del></del> -                         |  |
|   |   | -                                     |             | nd fees are submitted accordance with s. 605                           |                                       | Σľ   |
| Please return all corr  | respondence concernii                                 | g this matter to                      | );          |  |                                       |  |
| Rebecca Saferstein, S   | Senior Paralegal                                      |                                       |             |  |                                       |  |
|   | (Contact Person)                                      |                                       | <del></del> |  |                                       |  |
| Arnall Golden Gregory   | / LLP   |                                       |             |  |                                       |  |
|   | (Firm Company)  |                                       |             |  |                                       |  |
| 171 17th Street, NW.  | Suite 2100  |                                       |             |  | 2024                                  |  |
|   | (Address)   | · · · · · · · · · · · · · · · · · · · |             |  |                                       | •  |
| Atlanta, GA 30363   |   |                                       |             |  | ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ | \$1.0<br>\$1.0<br>\$1.0<br>\$1.0<br>\$1.0<br>\$1.0<br>\$1.0<br>\$1.0 |
| ( )   | City, State and Zip Code)                             |                                       |             |  | 2024 JUN 27 AM 9: 47                  | î  |
|   |   |                                       |             |  | n <sub>o</sub>                        | 37   |
| L-mail Address: (10 b   | oc used for future annual re                          | port notifications                    | }           |  |                                       | Vana.  |
| For further informati   | on concerning this ma                                 | tter, please cal                      | 1;          |  | m <b>1</b>                            |  |
| Rebecca Saferstein  |   | at (                                  | 870         | -5604  |                                       |  |
| (Name of Cont.  | ict Person)   | (Area Coc                             | le) (Da     | ytime Felephone Number)  | )                                     |  |
|   | for the following amou<br>a bank located in the       |                                       | s proces    | ssed by this office mus  | st be payable in US                   |  |
| S150.00 Filing Fees<br>(\$25 for Conversion<br>& \$125 for Articles<br>of Organization) | ☐\$155.00 Filing Fees<br>and Certificate of<br>Status | □S180,00 Fife<br>and Certified C      |             | ■\$185,00 Filing Fees,<br>Certified Copy, and<br>Certificate of Status |                                       |  |
| Mailing Add   |   |                                       |             | et Address:  |                                       |  |
| New Filing S<br>Division of C   |   |                                       |             | Filing Section sion of Corporations                                    |                                       |  |
| P.O. Box 632  |   |                                       |             | Centre of Tallahassee  |                                       |  |
| Tallahassee, I  | FL 32314  |                                       |             | N. Monroe Street, Su   | ite 810                               |  |

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 8.605.1045, Florida Statutes.

| 1. The name of the "Other Business Entity" in Black Gold Compost Company   | nmediately prior to the filing of the   | Articles of Conversion is.          | :     |
|--|---|-------------------------------------|-------|
|  | Other Business Entity)  | <del></del> '                       |       |
| 2. The "Other Business Entity" is a corporation (Enter entity type. Example: corporation   | D   |                                     |       |
|  |   |                                     | etc.) |
| First organized, formed or incorporated under  | the laws of   | 2024                                |       |
| First organized, formed or incorporated under  March 17, 1985  (date of organization, formation or incorporation)  | (Enter state, or if a non-U.S. en   | ntity, the name of the exempty)     |       |
| 3. The name of the Florida Limited Liability C   | Company as set forth in the attache   | rd Articles of Orga <b>o</b> izatio |       |
| Black Gold Compost Company, LLC  | , .   | <b>1</b>                            |       |
| (Enter Name of Florida La  | united Liability Company)   | <del></del> '                       |       |
| 4. If not effective on the date of liling, enter th (The effective date: Cannot be prior to date the date this document is filed by the Florid Note: If the date inserted in this block does not meet the document's effective date on the Department of State's | of receipt or filed date nor more la Department of State.) he applicable statutory filing requirements. | than 90 calendar days af            |       |
| 5. The plan of conversion has been approved in   | n accordance with all applicable sta  | ilutes.                             |       |

- 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.

Certificate of Status:

| Signed this 27th day of June   | 20.24  |
|--|--|
| Signature of Authorized Representative of Limi   |  |
| mos  | IPOS   |
| Signature of Authorized Representative: Printed Name: Robert M. Lange  | William President & CEO  |
| Fillited Ivalle, Noocit W. Lange   | Title: Fresident & OLO   |
| Signature(s) or benaffor Wither Business Entity:  Signature: Superposer A (BAB)  Printed Name: Robert M. Lange | See below for required signature(s)  |
| Signature:suezosaarxisaas  |  |
| Printed Name: Robert M. Lange  | _ Little: President & CEO  |
|  |  |
| Signature: Printed Name:   | Title:   |
|  |  |
| Signature:   |  |
| Signature: Printed Name:   | Title:   |
|  |  |
| Signature:Printed Name:  | Title  |
| runco Name.  | 11110.   |
| Signature:   |  |
| Printed Name:  | Title:   |
|  |  |
| Signature:Printed Name:  | Titles   |
| Printed Name:  | Title:   |
| If Florida Corporation:  | :<br>  |
| Signature of Chairman, Vice Chairman, Director, or (   | Officer  |
| If Directors or Officers have not been selected, an Inc  |  |
|  |  |
| If Florida General Partnership or Limited Liabili  | ty Partnership:  |
| Signature of one General Partner.  |  |
| If Florida Limited Partnership or Limited Liabilio   | to Limited Dartnarchies  |
| Signatures of ALL General Partners.  | W Chimed Larenership.  |
|  |  |
| All others:  |  |
| Signature of an authorized person.   |  |
| Fees:  |  |
| Antial and Committee   | ens m  |
| Articles of Conversion:<br>Fees for Florida Articles of Organization:  | \$25,00<br>\$125,00  |
| Certified Copy:  | \$30.00 (Optional)   |
| · · · · · · · · · · · · · · · · · · ·  | and the state of t |

\$5.00 (Optional)

ARTICLE 1 - Name:

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| DIACK GOIG COI | mpost Company, LLC  (Must contain the words "Limited | H iability Company, "L.L.C.," or "L.E.C.") | <del></del>       |
|----------------|--|--|-------------------|
| ARTICLE II     | Validamona   |  |                   |
|                |  | the principal office of the Limited Liab   | ility Company is: |
| Principal Off  | ice Address:   | Mailing Address:                           |                   |
| 11424 CR 237   |  | P.O. Box 190                               |                   |
| Oxford, FL 344 | 84   | Oxford, FL 34484                           |                   |
|                |  |  | 2024              |
| The name and   | the Florida street address of                        |  |                   |
|                | Robert M. Lange                                      |  | ë G<br>E M        |
|                | Robert M. Lange                                      | Name - Same                                | 14.6 W            |
|                | Robert M. Lange  1750 Buena Vista Dr.                |  | # 9:47            |
|                | 1750 Buena Vista Dr.                                 |  | M 9:47            |
|                | 1750 Buena Vista Dr.                                 | Name (P.O. Box <u>NOT</u> acceptable)      | M 9:47            |
|                | 1750 Buena Vista Dr.<br>Florida street addres        | Name                                       | M 9: 47           |

(CONTINUED)

Registered Agent's Signature (REQUIRED)

#### 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                     | Diggl. Cylet Compact Haldway Inc.  |
| AMBR                                | Black Gold Compost Holdings Inc. 11424 CR 237  |
|                                     | Oxford, FL 34484   |
|                                     | OXI010, PL 34404   |
|                                     |  |
| <del></del>                         |  |
|                                     |  |
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|                                     | 7.c. =   |
|                                     | ٠  |
| (Use attachment if necessary)       | <u> </u>   |
|                                     | · 다 -  |
|                                     |  |
| ICLE V: Other provisions, if any.   |  |
|                                     |  |
|                                     |  |
|                                     |  |
| WEATHER OLDS A WITH                 |  |
| REQUIREM SIGNATURE:                 |  |
| my his                              |  |
| <u></u>                             | 1  |
| Signature of a manches on           | an with aired managementative of a management  |
|                                     | an authorized representative of a member with section 605,0203 (1) (b), Florida Statutes, I am aware the |
|                                     | ment to the Department of State constitutes a third degree felo  |
| as provided for in \$.817.155, F.S. | •  |
| Robert M. Lange                     |  |
|                                     | ped or printed name of signee  |
| 1.7                                 | Filing Fore  |

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)