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(Requestor's Name)
(Address)
(,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

TO: Registration Section

Division of C	Corporations			
SUBJECT: NATIV	E PRESERVE LAW	/NSCAPES INC		
	Name of	Resulting Florida Profit Co	poration	
			a, and fees are submitted to convert an cordance with s. 607.1115, F.S.	
Please return all corr	espondence concerni	ng this matter to:		
ARTHUR RUBINS				
	Contact Person			
ARTHUR RUBIN	NSTEIN ACCOU	NTING		
	Firm/Company			
P.O. BOX 10				
	Address			
FLAGLER BEACH	i, FL 32136-0010			
	City, State and Zip Code			
AR ACCOUNTIN	·	rana e e e e e e e e e e e e e e e e e e		
E-mail address: (to	IG@YAHOO.CON be used for future annual	report notification)		
For further informati	on concerning this ma	atter, please call:		
ARTHUR RUBINST	EIN	at (386) 446	6-9580	
Name of Con	tact Person	Area Code and Dayt	ime Telephone Number	
Enclosed is a check f	or the following amo	unt:		
□ \$105.00 Filing Fees	✓\$113.75 Filing Fees and Certificate of Status	☐\$113.75 Filing Fees and Certified Copy	□\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
STREET ADDRESS:		MAILING A		
Registration Section		Registration Section		
Division of Corporations		Division of C P. O. Box 63	-	
Clifton Building 2661 Executive Center Circle		Tallahassee, FL 32314		
Tallahassee, FL 323		z arranassoc,		

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

FILED

11 AUG 23 PM 2: 30

SECRETARY OF STATE
ALLAHAGES

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

NATIVE PRESERVE LAWNSCAPES LLC 1-17248
Enter Name of Other Business Entity
2. The "Other Business Entity" is a SINGLE-MEMBER LLC
(Enter entity type. Example: limited liability company, 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)
on 02/15/2010 .
Enter date "Other Business Entity" was first organized, formed or incorporated
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>
NATIVE PRESERVE LAWNSCAPES INC .
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: 09/01/2011 (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the

conversion.

Signed this 18th	day of AUGUST	, 20_11	
Individual signing	ure for Florida Profit Corpora g affirms that the facts stated in the ony as provided for in s.817.155,	his document are true. Any false inform	ation constitutes
Signature of Chair selected, an Incorp Printed Name: AR	rman, Vice Chairman, Director porator: <u>A.H.M.</u> THUR RUBINSTEIN Title:	Officer, or if Directors or Officers have UNCORPORATOR	not been
Required Signatu stated in this docu s.817.155, F.S. [Se	re(s) on behalf of Other Busines ment are true. Any false informated below for pequired signature(s)	ss Entity: Individual(s) signing affirm(s ation constitutes a third degree felony as a.]	s provided for in
Signature: Printed Name: JAM	ES W. IRVINE	Title: MANAGING MEMBER	
		Title:	
Signature: Printed Name:		Title:	• -
Signature: Printed Name:		Title:	
Signature:Printed Name:		Title:	
Signature: Printed Name:		Title:	
	<u>l Partnership or Limited Liabili</u> eneral Partner.		
If Florida Limited Signatures of <u>ALL</u>	Partnership or Limited Liabili General Partners.	ty Limited Partnership:	
	Liability Company: hber or Authorized Representative	e .	
All others: Signature of an aut	horized person.		
	• •	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

	nation shall be: NATIVE PRESERVE	LAWNSCAPES	INC	
	RINCIPAL OFFICE Principal <u>street</u> address RETARY TRL	N P.O. B	Mailing address, if d OX 351824	ifferent is:
	OAST. FL 32164	PALM	OX 351824 COAST, FL 32	135
ARTICLE III PU	IRPOSE h the corporation is organized is:	<u> </u>		
ANY AND ALL	LAWFUL BUSINESS	,		
ARTICLE IV Si	HARES of stock is: 2,000 AUTHORIZED,	1,000 ISSUED		
ARTICLE V IN	NITIAL OFFICERS AND/OR DIRECT	ORS		
Name and Title Address:	JAMES W. IRVINE - P.T. 52 SECRETARY TRL PALM COAST, FL 32164	Address:	JAMES LESKINE 910 BIG TREE RI SOUTH DAYTON	OAD B2 #3
Name and Title Address:		Address:		
Name and Title: Address:		Name and Title: Address:		
			JAMES W. IRVINE	
	EGISTERED AGENT		u in.	Z _S :
Name: Address:	a street address (P.O. Box NOT acceptable JAMES W. IRVINE 52 SECRETARY TRL PALM COAST, FL 32164			AUG 23 CRETARY LAHASSE
ARTICLE VII IN			·	
The <u>name and addres</u> Name: Address:	ss of the Incorporator is: ARTHUR RUBINSTEIN PO BOX10			1 2: 3 STATE
^	FLAGYER BEACH, FL 32136			>''' o
Having been named a this certificate, I am fo	as registered agent to accept service of pro amility with and accept the appointment as	cess for the above stat registered agent and a	ed corporation at t gree to act in this c	he place designated in apacity
Required	Signature/Registered Agent	Date		
	nt and affirm that the facts stated herein (rtment of State constitutes a third degree fe			mation submitted in a
alle	u Rulu Lec	8/15	5/11	
Required	Signature/Incorporator	/ Date	•	