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| PICK-UP WAIT MAIL | | | | |
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| (Business Entity Name) | | | | |
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| (Document Number) | | | | |
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| Certified Copies Certificates of Status | | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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SECRETARY OF STATE ALLAHASSEE, FLORID,

COVER LETTER

| TO: Registration S Division of C | | | |
|--|--|---|---|
| SUBJECT: | GPE, T | ENC; esuming Florida Profit Corp | porati ð n |
| | | | and fees are submitted to convert an ordance with s. 607.1115, F.S. |
| Please return all corr | espondence concerning | g this matter to: | |
| LYNN | Adams Contact Person | | |
| It's | YOUY MO | mey, LLC | |
| 2768 | SRAIA - | # 308 | |
| | c Beach | , FL 322 | 233 |
| • | Irmoney@ | Comcast. | Net |
| • | on concerning this mat | | |
| VAN Name of Con | dams ttact Person | at (<u>904)</u> <u>J</u> Area Code and Daytin | 70 2876 me Telephone Number |
| Enclosed is a check f | for the following amou | nt: | |
| \$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 Registration Section Division of Corporate Clifton Building 2661 Executive Cent | ions er Circle | MAILING A Registration S Division of C P. O. Box 632 Tallahassee, F | Section orporations 27 |



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 15, 2011

LYNN ADAMS 2768 SR A1A #308 ATLANTIC BEACH, FL 32233

SUBJECT: GPE, INC.

Ref. Number: W11000062571

We have received your document for GPE, INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

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) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 511A00027980

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

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: | | | | | |
|---|--|--|--|--|--|
| Gregory Pall Enterprises, LLC. Enter Name of Other Business Entity | | | | | |
| Enter Name of Other Business Entity | | | | | |
| 2. The "Other Business Entity" is a Limited Liability Company (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 8-19-09 | | | | | |
| 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: NO | | | | | |
| 4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> | | | | | |
| GPE Groundskeeping, Inc, | | | | | |
| Enter Name of Florid 'rotit Corporation | | | | | |
| 5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this socument 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.) | | | | | |
| 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. | | | | | |
| 7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is | | | | | |

currently organized, formed or incorporated.

| Signed this 9th day of December, 2011. | | | | | |
|---|-----------------|--|--|--|--|
| Required Signature for Florida Profit Corporation: Individual signing affirms that the facts stated in this document are true. Any false informati a third degree felony as provided for in s.817.155, F.S. | ion constitutes | | | | |
| Signature of Chairman, Vice Chairman, Directors or Officers have no selected, an Incorporator: Printed Name: Gregory Fall Title: Tresident | ot been | | | | |
| Required Signature(s) on behalf of Other Business Entity: Individual(s) signing affirm(s) the stated in this document are true. Any false information constitutes a third degree felony as press. 817.155, F.S. [See below for required signature(s).] Signature: Printed Name: Gregory Fall Title: Managing Members. | rovided for in | | | | |
| Printed Name: Gregory Fall Title: Managing Memb | er of LLC | | | | |
| Signature: Title: | | | | | |
| Signature: Printed Name:Title: | | | | | |
| Signature: | | | | | |
| Signature: Title: | | | | | |
| Signature: Title: | | | | | |
| If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. | | | | | |
| If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. | | | | | |
| If Florida Limited Liability Company: Signature of a Member or Authorized Representative. | | | | | |
| All others: Signature of an authorized person. | | | | | |
| Fees: Certificate of Conversion: \$35.00 Fees for Florida Articles of Incorporation: \$70.00 Certified Copy: \$8.75 (Optional) Certificate of Status: \$8.75 (Optional) | | | | | |

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

| The name of the corpo | AME GPE oration shall be: | GROUNDSKE | eping, Inc. |
|--|--|--|---|
| ARTICLE II P. JACKS | RINCIPAL OFFICE Principal street address DRAKES POINT ONULL, FL 3222 | Drive | Mailing address, if different is: |
| Comr | | sidential g | grounds keeping and |
| ARTICLE IV S. The number of shares | of stock is: | | |
| Name and Title Address: | GREGORY V. PAI 14245 DRAKES JACKSONVILLE, FL | Point Draddress: | tle: |
| Name and Title Address: | | Address: | tle: |
| Name and Title Address: | : | | tle: |
| | EGISTERED AGENT a street address (P.O. Box NOT GREGORY V. Pal 14245 DRAKES JACKSONVIIIE, F | POIN DRIVE | agent is: |
| ARTICLE VII IN The name and addres Name: Address: | SECORPORATOR SE OF THE Incorporator is: T'S WOUR ME DIDS STOLE RO Allantic Beach | ondy LLC Ad AIA #30 1, FL 32233 | 18 |
| this certificage, I am f | y falls | ice of process for the above ntment as registered agent a | stated corporation at the place designated in and agree to act in this capacity |
| I submit this docume document to the Depa Mullus | I Signature/Registered Agent ont and affirm that the facts state artment of State constitutes a third Signature/Incorporator | | re that any false information submitted in a or in s.817.155, F.S. |
| · \ ivoquirou | 2.D. arara a ritan horaror | <u> </u> | *** |