

P1400006345

(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:

Office Use Only



700254006347

12/06/13--01003--017 **113.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JAN 21 AM 10:09

1513-67352

1-2314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 10, 2013

MAXWELL LARGENT
702 51ST STREET EAST
APT 1315-B
BRADENTON, FL 34208

SUBJECT: TROPICAL LIFESTYLE LANDSCAPE, INC.
Ref. Number: 700254006347

We have received your document for TROPICAL LIFESTYLE LANDSCAPE, INC. and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

Please return the corrected original and one copy of 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.

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

Letter Number: 913A00028024

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Tropical Lifestyle Landscape, Inc.

Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Maxwell Largent

Contact Person

Firm/Company

702 51st. Street East Apt.#1315-B

Address

Bradenton, FL 34208

City, State and Zip Code

max@tropicallifestylelandscape.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maxwell Largent

at **(727) 421-8462**

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$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:

Charter Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Charter Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 10, 2013

MAXWELL LARGENT
702 51ST STREET EAST
APT 1315-B
BRADENTON, FL 34208

SUBJECT: TROPICAL LIFESTYLE LANDSCAPE, INC.
Ref. Number: 700254006347

We have received your document for TROPICAL LIFESTYLE LANDSCAPE, INC. and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

Please complete #3 of your conversion.

Please return the corrected original and one copy of 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.

Sylvia Gilbert
Regulatory Specialist II
New Filing Section

Letter Number: 913A00028024

SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JAN 21 AM 10:00

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:

Tropical Lifestyle Landscape, LLC

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 **September 15, 2013**

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:

N/A

4. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation:**

Tropical Lifestyle Landscape, Inc.

Enter Name of Florida Profit 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 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.)

Signed this 26th day of November, 2013.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: _____

Printed Name: Maxwell Largent Title: President

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: _____
Printed Name: Maxwell Largent Title: MGRM

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ 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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JAN 21 4:10:08

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt the following Articles of Incorporation.

ARTICLE I-NAME

The name of the corporation shall be:

Tropical Lifestyle Landscape, Inc.

ARTICLE II-PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

702 51st. Street East Apt.#1315B

Bradenton, FL 34208

ARTICLE III-SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 Shares

ARTICLE IV-INITIAL REGISTERED AGENT AND STREET ADDRESS:

The name and address of the initial registered agent are:

Maxwell Largent

702 51st. Street East Apt. # 1315B

Bradenton, FL 34208

ARTICLE V-NAME OF OFFICERS

The following persons are appointed to the offices set forth opposite their names to serve.

President	Maxwell Largent	702 51st. Street East Apt. #1315B Bradenton , FL 34208
Vice-President	Maxwell Largent	702 51st. Street East Apt. #1315B Bradenton, FL 34208
Secretary	Maxwell Largent	702 51st. Street East Apt. #1315B Bradenton, FL 34208

ARTICLE VI- INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation are:

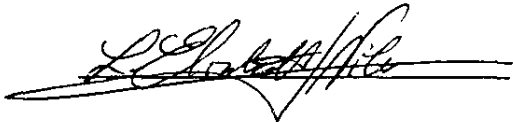
Laura E. Niles

DbA Niles & Associates Financial Services

4321 Pompano Drive S.E.

St. Petersburg, FL 33705

The undersigned Incorporator have executed these Articles of Incorporation this
26th day of November, 2013.

A handwritten signature in black ink, appearing to read 'Laura E. Niles', is written over a horizontal line.

Laura E. Niles

Niles & Associates Financial Services

Note: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTER AGENT/REGISTER OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.501, FLORIDA STATUTES THAT, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.- The name of the corporation is:

Tropical Lifestyle Landscape, Inc.

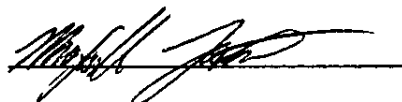
2.- The name and address of the registered agent and office is:

Maxwell Largent

702 51st. Street East Apt.# 1315B

Bradenton, FL 34208

Having been named as registered agent and to accept service of process for the above stated corporation 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.



Signature

12-2-13

Date