

P14000086436

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

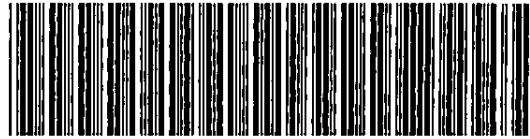
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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07/08/14--01020--024 \*\*105.00

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14 OCT 16 AM 7:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

gf 10/24/14

**COVER LETTER**

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** DPS Service, 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:

Michael Garrett

Contact Person

DPS Service, LLC

Firm/Company

16250 SW Farm Rd

Address

Indiantown, FL 34956

City, State and Zip Code

dpswildlifetrappers@gmail.com

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

For further information concerning this matter, please call:

Michael Garrett

Name of Contact Person

at ( 772 ) 204-3240

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:**

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

**MAILING ADDRESS:**

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

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14 OCT 16 AM 7:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

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14 OCT 16 AM 7:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

September 24, 2014

MICHAEL GARRETT  
16250 SW FARM ROAD  
INDIANTOWN, FL 34956

SUBJECT: DPS SERVICE, INC  
Ref. Number: W14000042276

We have received your document for DPS SERVICE, 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):

You failed to make the correction(s) requested in our previous letter.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 914A00020514

RECEIVED  
14 OCT 16 AM 10:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



RECEIVED

14 SEP 22 PM 2:58

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

July 9, 2014

MICHAEL GARRETT  
16250 SW FARM ROAD  
INDIANTOWN, FL 34956

SUBJECT: DPS SERVICE, INC  
Ref. Number: W14000042276

We have received your document for DPS SERVICE, 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 document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

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.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 114A00014783

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14 OCT 16 AM 7:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Certificate of Conversion**

For

**"Other Business Entity"**

Into

**Florida Profit Corporation**

FILED

14 OCT 16 AM 7:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

**DPS Service, LLC**

Enter Name of Other Business Entity L12000059133

2. The "Other Business Entity" is a **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 **May 2, 2012**  
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:

**Florida**

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

**DPS Service, 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 26 day of June, 2014.

**Required Signature for Florida Profit Corporation:**

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Officer Michael S. Garrett

Printed Name: Michael Garrett Title: President, Owner

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

Signature: Michael S. Garrett  
Printed Name: Michael Garrett Title: President, Owner

Signature: Michael S. Garrett  
Printed Name: Michael Garrett Title: Director

Signature: Michael S. Garrett  
Printed Name: Michael Garrett Title: Chairman

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) |

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

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

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OCT 16 AM 7:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be: DPS Service, inc

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

Principal street address

Mailing address, if different is:

16250 SW Farm Rd  
Indiantown, FL 34956

PO Box 1164  
Indiantown, FL 34956

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Wildlife Removal

**ARTICLE IV SHARES** 100

The number of shares of stock is:

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Michael Garrett, Pres

Name and Title: Michael Garrett, VP

Address: PO Box 1164  
Indiantown, FL 34956

Address: PO Box 1164  
Indiantown, FL 34956

Name and Title: Michael Garrett, Sec

Name and Title: Michael Garrett, Treasure

Address: PO Box 1164  
Indiantown, FL 34956

Address: PO Box 1164  
Indiantown, FL 34956

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Michael Garrett  
Address: 16250 SW Farm Rd  
Indiantown, FL 34956

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Michael Garrett  
Address: 16250 SW Farm Rd  
Indiantown, FL 34956

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

Michael S. Garrett  
Required Signature/Registered Agent

6/26/2014  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

Michael S. Garrett  
Required Signature/Incorporator

6/26/2014  
Date

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14 OCT 16 AM 7:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA