P1600049839

(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:				

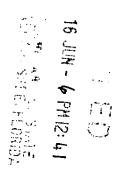
Office Use Only

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JUN & 2016



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 1, 2016

MICHAEL P. FERRARA 915 SIDNEY TERRACE NW PORT CHARLOTTE, FL 33948

SUBJECT: CONSERVA IRRIGATION OF SWFL, INC.

Ref. Number: W16000039226

We have received your document for CONSERVA IRRIGATION OF SWFL, 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 state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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.

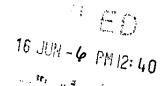
If you have any questions concerning the filing of your document, please call (850) 245-6052.

Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 316A00011236

COVER LETTER

TO:	Charter Section Division of Co				
SUBJ	ECT. Conserva Ir	rigation of SWFL, Inc.			
эс во		Name of	Resulting Florida	Profit	Corporation
		e of Conversion, Article Profit Corporation" in ac			ees are submitted to convert an "Other Business 15, F.S.
Please	return all corresp	pondence concerning thi	s matter to:		
Micha	el P. Ferrara				
		Contact Person		-	
Conse	va Irrigation of SV	WFL, Inc.			
		Firm/Company	Projection of Problems	-	
915 Si	dney Terrace NW				
		Address		-	
Port C	harlotte, FL 33948				
		City, State and Zip Cod-	e	_	
mike,f	errara@conservair	rigation.com			
- I	E-mail address: (t	o be used for future annu	ual report notifica	tion)	
For fu	ther information	concerning this matter,	please call:		
Michae	el P. Ferrara		941 _at (875-8	376
	Name of Co	ontact Person	Area C	ode and	Daytime Telephone Number
Enclos	ed is a check for	the following amount:			
\$10	5.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filin and Certified Co	g Fees opy	□\$122.50 Filing Fees, Certified Copy, and Certificate of Status
New F Division Cliftor 2661 E	ET ADDRESS: ilings Section on of Corporation Building Executive Center assee, FL 32301			New F Division P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assee, FL 32314



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 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:
Conserva Irrigation of SWFL, 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
(Enter state, or if a non-U.S. entity, the name of the country)
03/21/2016 on
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:
Conserva Irrigation of SWFL, 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.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be

listed as the document's effective date on the Department of State's records.

Signed this 17th day of May	, 20_16				
Required Signature for Florida Profit Corporation	1				
Signature of Chairman, Vice Chairman, Director, Offic Ricorporator: Michael P. Ferrara Ritle: Preside	eer or, if Directors or Officers have not been selected, au				
Required Signature(s) on behalf of Other Business	Entity: [See below for required signature(s).]				
Signature: V Michael Perfessione					
Printed Name: Michael P. Perrara	Title: President				
Signature:					
Printed Name:	Title;				
Signature:	· · · · · · · · · · · · · · · · · · ·				
Printed Name:	Title:				
Signature:					
Printed Name:					
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 Linbility Signatures of ALL Concrat Portners.	Limited Partnership;				
If Florida Limited Liability Company; Signature of a Member or Authorized Representative.					
All others: Signature of an authorized person.					
Fees: Certificate of Conversion: Certificate of Conversion:	\$35.00 \$70.00				
Certified Copy: Conflicate of Status:	\$8.75 (Optional) \$8.75 (Optional)				

Page 2 of 2

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

ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Mailing Address: Principal street address Principal street address Mailing address, if different is: Mailing address, if different is:	The name of the corporation shall be:Conserva Irrigation	n of SWFL, Inc.
Principal street address 915 Sidney Terrace NW Port Charlotte, FL 33948 ARTICLE III PURPOSE The purpose for which the corporation is organized is: To conduct any and all lawful business. ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Michael P, Ferrara P, S, T & D. Name and Title: Address: Port Charlotte, FL 33948		All plants of the
Principal street address 915 Sidney Terrace NW Port Charlotte, FL 33948 ARTICLE III PURPOSE The purpose for which the corporation is organized is: To conduct any and all lawful business. ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Michael P, Ferrara P, S, T & D. Name and Title: Address: Port Charlotte, FL 33948		SEC. FLOR
Port Charlotte, FL 33948 ARTICLE III PURPOSE The purpose for which the corporation is organized is: To conduct any and all lawful business. ARTICLE IV SHARES The number of shares of stock is: ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS Name and Title: Michael P. Ferrara P. S. T & D. Name and Title: 915 Sidney Terrace NW Address: Port Charlotte, FL 33948	oud out and a service	
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Address: 915 Sidney Terrace NW Address: Port Charlotte, FL 33948	ARTICLE V INITIAL OFFICERS AND/OR I	DIRECTORS
Address: 915 Sidney Terrace NW Address: Port Charlotte, FL 33948	Name and Title: Michael P. Ferrara P, S, T & D.	Name and Title:
	Address: 915 Sidney Terrace NW	Address:
	Port Charlotte, FL 33948	
Name and Title: Name and Title:	Name and Title:	Name and Title:
Address: Address:	Address:	Address:
Name and Title: Name and Title:		
Address: Address:		Name and Title:

ARTICL	E VI REGISTERED AGENT		
The <u>name</u>	e ànd Florida street address (P.O. Box NOT a	cceptable) of the registered agent is:	
Name:	Michael P. Ferrara		
Address:	915 Sidney Terrace NW		
	Port Charlotte, Fl 33948		
ARTICL			
The name	e and address of the Incorporator is:		
Name:	Michael P. Ferrara		
Address:	915 Sidney Terrace NW		
	Port Charlotte, FL 33948		
******	**********	**********	
		e of process for the above stated corporation at the place desi tment as registered agent and agree to act in this capacity	ignated in
1/2	richael P. Ferrara	5/17/16	
	Required Signature/Registered Agent	Date	
	this document and affirm that the facts stated it to the Department of State constitutes a third i	herein are true. I am aware that any false information subm degree felony as provided for in s.817.155, F.S.	nitted in a
	michael ? Lessara	5/17/16	
	Required Signature/Incorporator	Date	