

PN000033942

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APR 13 2017

T SCHROEDER

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: CREATIVE LAWN MAINTENANCE, 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:

DAVID E BROWN
Contact Person

CREATIVE LAWN MAINTENANCE, INC
Firm/Company

2900 NW 6th COURT
Address

POMPANO BEACH, FLORIDA 33069
City, State and Zip Code

Jim.GREENERGrass@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHAKKA MCFADDEN at (954) 868-8001
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:
New Filings Section
Division of Corporations
Clifton Building

MAILING ADDRESS:
New Filings Section
Division of Corporations
P. O. Box 6327

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:

CREATIVE LAWN MAINTENANCE, LLC L11-139165
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 JANUARY 1ST, 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**:

CREATIVE LAWN MAINTENANCE, INC
Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: APRIL 20, 2017
(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.

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OFFICE OF THE CLERK
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Signed this 16 day of MARCH, 2017

Required Signature for Florida Profit Corporation:

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

Printed Name: DAVID E. BROWN Title: MANAGING MEMBER

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

Signature: David E Brown

Printed Name: DAVID E BROWN Title: MANAGING MEMBER

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
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF DADE
FLORIDA

17 APR -5 PM 3:21

2017

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

ARTICLE I NAME

The name of the corporation shall be: CREATIVE LAWN MAINTENANCE, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

Principal street address

Mailing address, if different is:

2900 N.W. 6TH COURT
POMPADOR BEACH, FL 33069

P.O. BOX 669261
POMPADOR BEACH, FL 33066

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NEEDING TO CHANGE THE BUSINESS ENTITY FOR LEGAL
AND TAXABLE LAWS

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DAVID E. BROWN OWNER Name and Title: _____

Address: 2900 N.W. 6TH COURT Address: _____
POMPADOR BEACH, FL 33069

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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CLERK OF CIRCUIT COURT
DADE COUNTY, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: DAVID E BROWN

Address: 2400 N.W. 10th COURT
POMPANNO BEACH, FL 33069

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DAVID E. BROWN

Address: 2400 N.W. 10th COURT
POMPANNO BEACH, FL 33069

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

David E Brown
Required Signature/Registered Agent

3-16-17
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.

David E Brown
Required Signature/Incorporator

3-16-17
Date

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TALLAHASSEE, FLORIDA