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(Re	equestor's Name)	<u> </u>
(Ad	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only

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COVER LETTER

Division of Corporations

SUBJECT: JNR FLORIDA TRANSPORT INC

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion. Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

GREISY SUAREZ
(Contact Person)
DIRECT SOLUTION SERVICES
(Firm/Company)
1248 VISCAYA PKWY
(Address)
CAPE CORAL
(City. State and Zip Code)

INFO@DIRECTSOLUTIONSERVICES.COM

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

GREISY SUAREZ	at (239	,443 5846
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)

□ \$155.00 Filing Fees and Certificate of Status
□ \$180.00 Filing Fees and Certified Copy (Certified Copy, and Certificate of Status)

Mailing Address:

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

Street Address:

New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045. Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: JNR FLORIDA TRANSPORT INC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION (DIC) 2003 (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of FLORIDA
On (Enter state, or if a non-U.S. entity, the name of the country) (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: JNR FLORIDA TRANSPORT LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 04/02/2019 (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.) 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.

- 5. The plan of conversion has been approved in accordance with all applicable statutes.
- 6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.



Signed this 18 day of FEBRUARY				
Signature of Authorized Representative of Limi	ted Liability Company:			
Signature of Authorized Representative: Printed Name: JIUVEL NOA RODRIGUEZ	Title: PRESIDENT	_		
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]			
Signature: Da.a. Printed Name: JIUVEL NOA RODRIGUEZ	Title: PRESIDENT			
Signature: Printed Name:		<u> </u>		
Signature:Printed Name:	Title:	<u> </u>		
Signature:Printed Name:	Title:	<u></u>		
Signature:Printed Name:	Title:	<u> </u>		
Signature:Printed Name:	Title;	- -		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.				
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:			
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:			
All others: Signature of an authorized person.		80 20	2020 FEB	
Fees:			EB 24	e-aun
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	ASSEE, FL	4 AM 6:37	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
JNR FLORIDA TRANSPORT LLC		
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.";)
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limi	ted Liability Company is:
Principal Office Address:	Mailing Address:	
1818 NE 1ST ST	1818 NE 1ST ST	
CAPE CORAL, FL 33909	CAPE CORAL, FL 33909	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re	red Agent. You must designate a	
JIUVĖL NOA RODRIGUEZ	<u>. </u>	
Name		
1818 NE 1ST ST		
Florida street address (P.O.	Box NOT acceptable)	
CAPE CORAL	FL 33909	
City	Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete paracept the obligations of my position as regional.	this certificate, I hereby on the control of the co	accept the appointment as uply with the provisions of all and I am familiar with and I for in Chap 605, F.S.
Woa.		- EB 24
Registered Agent's Signa	ature (REQUIRED)	
(CONTINU	JED)	AM 6: 37

ARTICLE IV-

 $c_{i_1,\ldots,i_{k-1},\ldots,i_{k-1}}(t) = c_{i_1,\ldots,i_{k-1}}$

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
MGR	JIUVEL NOA RODRIGUEZ	
	1818 NE 1ST ST	-
	CAPE CORAL, FL 33909	
	•	
		·
		
(Use attachment if necessary)		
		~
ARTICLE V: Other provisions, if any.		SECRET TALLE
		2 2
		NSSS P
REQUIRED SIGNATURE:		
		4 6: 37 EE. FL
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Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, 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.

JIUVEL NOA RODRIGUEZ

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)