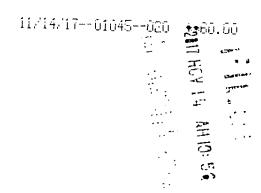
# 112000110481

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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## **COVER LETTER**

TO: Registration : Division of C			
SUBJECT: [ Dat		Limited Liability Compan	<u>y</u>
		ce(s) are submitted to c r Business Entity" in a	
Please return all corr	eșpondence concernin	g this matter to:	
.Shahi	m me ba	(4)	
	Contact Person	VO	
(Oremo	& Transpo	rt uc	
· 0 (1	Firm/Company		
19519 W	radds ford	lake one	
Acand	Modrets MA	7043	
City, State and Zip Code			
E-mail address: (to	SOCH W Q U QV be used for future amulal i	eport notification)	
For further informati	on concerning this ma	tter, please call:	
Shahua	MEGAN	at (516 ) 2	82 4885
Name of Contact Po	erson	Area Code and Day	time Telephone Number
Enclosed is a check t	or the following amou	int:	
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee and Certificate of Status	☐S55.00 Filing Fee and Certified Copy	S60.00 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS:		MAILING ADDRESS:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
Clifton Building		P. O. Box 6327	
2661 Executive Center Circle		Tallahassee.	FL 32314
Tallahassee, FL 323	01		

CR2E106 (07/14)

## **Articles of Conversion**

For

### Florida Limited Liability Company

Into

# "Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:
Coremax Transport uc
Enter Name of Florida Linkted Liability Company
2. The name of the "Converted or Other Business Entity" is:
Conemax Transport Lic
Enter Name of "Converted or Other Business Entity"
3. The "Converted or Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)
organized, formed or incorporated under the laws of
and the formation document is attached (if applicable).
4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.
5. This conversion shall be effective in Florida on: 110100.  (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 of the conversion under the laws governing the "Other Business Entity.")
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.

- 6. If the "Converted or Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Converted or Other Business Entity":
  - a.) Lists the following street and mailing address of an office the Florida Department of State may send and process served on the department pursuant to 605.0117 and Chapter 48.

Street Address:	15519 Chaldeford Lake Drive			
	Brandywine MD roxers			
Mailing Address:	sant.			
	Other Business Entity" has agreed to pay any members having amount to which such members are entitled under ss. 605.1006 1072, F.S.			
Signed this13th	day of November 20 17			
Signature:  Must be signed by a Member or Authorized Representative				
Printed Name: 5N	Thra M=Gastrile: Co-count()			
Fees: Filing Fee:	\$25.00			
Certified Copy	: \$30.00 (Optional)			
Certificate of S	tatus: \$5.00 (Optional)			

Page 2 of 2

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