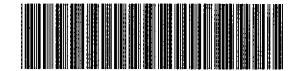
# L14000007663

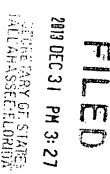
(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Linky Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
· ·
W14-510

Office Use Only



600254777996

12/30/13--01006--012 \*\*150.00



JAN 1 5 2014

7, 27,**10**%



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 3, 2014

ELIEL SANTOS 630 HIGHLAND MEADOWS ST DAVENPORT, FL 33837

SUBJECT: A&S TRANSPORTATION LLC

Ref. Number: W1400000510

We have received your document for A&S TRANSPORTATION LLC and your check(s) totaling \$150.00. However, the enclosed document has not been tiled and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other fillings of filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

The document number of the name conflict is P96000053044.

Please return 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) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 914A00000203

2019 DEC 31 PM 3: 27

#### **COVER LETTER**

Division of C							
SUBJECT. A&S T	ransportation LL	С					
ochsect		of Resulting Flor	rida Limit	ed Company)	_		
Business Entity" into		iability Compa	any" in a	, and fees are submitted accordance with s. 605.1			Other
ricase return an corp	espondence concernin	ig uns matter t	U.				
Eliel Santos							
	(Contact Person)						
					E	2013	
	(Firm/Company)				25-313 25-313	8	-
630 Highland M					3.7	C <sub>3</sub>	Contraction of the Contraction o
	(Address)				会議		8
Davenport Florid	da 33837						
	City, State and Zip Code)				98	3: 2:	
santos906@msi					SA	27	
E-mail Address: (to b	e used for future annual re	port notifications	s)				
For further information	on concerning this ma	tter, please cal	11:				
Eliel Santos		_ <sub>at (</sub> 201	<sub>\</sub> 563	35367			
(Name of Conta	et Person)		ode and D	aytime Telephone Number)	_		
Enclosed is a check f	or the following amou	ınt:					
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fil and Certified C		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
STREET ADDRESS	S:	MA	ILING A	ADDRESS:			
Registration Section		_		Section	,		
Division of Corporate Clifton Building	ions		sion of 0 . Box 63	Corporations			
2661 Executive Cent	er Circle			FL 32314			
	*- *	<b>2</b>	,				

Tallahassee, FL 32301

### **Certificate of Conversion**

For

## "Other Business Entity"

Into

#### Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes

A&S TRansportation LLC (Er	ter Name of Other Business Entity)	
2. The "Other Business Entity" is	a Limited liability company	
•	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorpo	rated under the laws of New Jersey	
on 11/07/2011	(Enter state, or if a non-U.S. entity, the name of the country)	
(date of organization, formation or in	corporation)	
3. The name of the Florida Limite	d Liability Company as set forth in the attached Articles of Organization	
A&S TRansportation	JS LLC	
(Enter Nam	of Florida Limited Liability Company)	
4. If not effective on the date of fi	ling, enter the effective date: 01/01/2014	
(The effective date: 1) cannot be date this document is filed by the	prior to date of receipt or filed date nor more than 90 days after the Florida Department of State; <u>AND</u> 2) must be the same as the effectives of Organization, if an effective date is listed therein.)	е

Page 1 of 2

•		•	
Signed this 26	day of December	20 <u>13</u> .	
Signature of Author	orized Representative of Limi	ted Liability Company:	
Signature of Author Printed Name: Eliel S	rized Representative:	Title: Owner	
		See below for required signature(s).	
Signature: Wil	Sant 1	Title: O WMCV	
Signature: Printed Name:		Title:	
Printed Name:		Title:	•
Signature:		Title:	
Signature: Printed Name:		Title:	•
Printed Name:		Title:	-
	tion: nan, Vice Chairman, Director, or the ers have not been selected, an Ind		
If Florida General Signature of one Ge	Partnership or Limited Liabilioneral Partner.	ty Partnership:	
If Florida Limited Signatures of ALL	Partnership or Limited Liabili General Partners.	ty Limited Partnership:	2111 D
All others: Signature of an auth	orized person.		DEC 31
Fees:			The R I
Articles of 6 Fees for Flo Certified Co Certificate	orida Articles of Organization: opy:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	3: 27 JANE ORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
A&S TRansportation US LLC		
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")	<del> </del>
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited L	iability Company is:
Principal Office Address:	Mailing Address:	
630 Highland Meadows ST	same	
Davenport Florida 33837		
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	ered Agent. You must designate an indiv	
ELIEL SANTOS Name		
630 Highland Meadows st  Florida street address (P.O.	Box NOT acceptable)	
⊔avenport	FL 33837	
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 capaci statutes relating to the proper and complete p accept the obligations of my position as reg	this certificate, I hereby accept ty. I further agree to comply w erformance of my duties, and I	t the appointment as ith the provisions of all am familiar with and
Registered Agent's Si	gnature (REQUIRED)	2019 DEC 3
(CONTINU		PH 3:
Page 1 of	72	:27

Company:	
<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
•	
(Use attachment if necessary)  TICLE V: Effective date, if other than the	e date of filing: (OPTIONAL)
TICLE V: Effective date, if other than the an effective date is listed, the date must lar 90 days after the date of filing.)	e date of filing: (OPTIONAL) be specific and cannot be more than five business days
TICLE V: Effective date, if other than the an effective date is listed, the date must lar 90 days after the date of filing.)	e date of filing: (OPTIONAL)  be specific and cannot be more than five business days p
TICLE V: Effective date, if other than the an effective date is listed, the date must lar 90 days after the date of filing.) TICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	e date of filing: (OPTIONAL)  be specific and cannot be more than five business days p
TICLE V: Effective date, if other than the an effective date is listed, the date must lar 90 days after the date of filing.) TICLE VI: Other provisions, if any.	e date of filing: (OPTIONAL)  be specific and cannot be more than five business days p
TICLE V: Effective date, if other than the an effective date is listed, the date must be r 90 days after the date of filing.)  TICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member (In accordance with section 605.0203 (It constitutes an affirmation under the penal I am aware that any false information suit constitutes a third degree felony as provi	r or an authorized representative of a member.  (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are true bmitted in a document to the Department of State ided for in s.817.155, F.S.)
TICLE V: Effective date, if other than the an effective date is listed, the date must be r 90 days after the date of filing.)  TICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member (In accordance with section 605.0203 (It constitutes an affirmation under the penal I am aware that any false information suit constitutes a third degree felony as provi	r or an authorized representative of a member.  (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are true bmitted in a document to the Department aff State
TICLE V: Effective date, if other than the an effective date is listed, the date must be 190 days after the date of filing.)  TICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member (In accordance with section 605.0203 (I constitutes an affirmation under the penal I am aware that any false information succonstitutes a third degree felony as proving the section for the penal of the section formation succonstitutes a third degree felony as proving the section for the penal of the section formation succonstitutes a third degree felony as proving the section for the penal of the section formation succonstitutes a third degree felony as proving the section formation succonstitutes at third degree felony as proving the section for the sec	r or an authorized representative of a member.  (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are true bmitted in a document to the Department of State ided for in s.817.155, F.S.)
TICLE V: Effective date, if other than the an effective date is listed, the date must be 190 days after the date of filing.)  TICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member (In accordance with section 605.0203 (It constitutes an affirmation under the penal I am aware that any false information suit constitutes a third degree felony as proving Type	r or an authorized representative of a member.  (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are true bmitted in a document to the Department of State ided for in s.817.155, F.S.)