# 14000015751

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

Office Use Only



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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

January 9, 2014

ISRAEL GUERRA 20 NW 58 CT MIAMI, FL 33126

SUBJECT: WONDERLAND AUTO CARRIERS, LLC

Ref. Number: W14000001724

We have received your document for WONDERLAND AUTO CARRIERS, LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

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) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 514A00000611

#### **COVER LETTER**

Tallahassee, FL 32314

TO: Registration Section Division of Corporations				
SUBJECT: 11) Onder land Avio Carrier, LLC (Name of Resulting Florida Limited Company)				
The enclosed Certificate 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:				
Tsrael Guerra (Contact Person)				
(Firm/Company)  20 NW 58 Cf. (Address)				
Miami FL 33126. (City, State and Zip Code)				
E-mail Address: (to be used for future annual report notifications)				
For further information concerning this matter, please call:				
TSCAL CTURITA at (\$32) 589-7909 (Name of Contact Person) (Area Code) (Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$\Bigcup \\$150.00 \text{ Filing Fees} \\ \text{(\$\\$25 for Conversion} \\ \&\\$125 for Articles \\ of Organization) \end{array} \Bigcup \\$155.00 \text{ Filing Fees} \\ \text{and Certified Copy} \\ \text{and Certified Copy} \\ \text{Certificate of Status} \end{array} \text{Certificate of Status} \end{array}				
STREET ADDRESS:MAILING ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsClifton BuildingP. O. Box 6327				

2661 Executive Center Circle Tallahassee, FL 32301

### **Certificate of Conversion**

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

This Certificate 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 this Certificate of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Living Lichily Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on 10/25/2013 (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:
Wonderland Auto Carrier, Lic.
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.

Page 1 of 2

Signed this Ow day of January	20	<i>(</i> -	
Signature of Authorized Representative of Limited Liability Company:			
Signature of Authorized Representative:	Title: President	<del></del>	
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s).]		
Signature: Printed Name: TSALL Courter	Title: President	<del>-</del>	
Signature: Printed Name: Signa Vasallo	Title: maracet	_	
Signature: Printed Name:	•		
Signature: Printed Name:	Title:	 	
Signature:Printed Name:	Title:	<del></del>	
Signature:Printed Name:	That .	_	
If Florida Corporation:	ritie:	-	
Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.			
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:		
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:	ALL IN	
All others: Signature of an authorized person.		JAN -7	
Fees:			
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	Name of the second	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
20 NW 58 Ct 20 NW 58 Ct MICHAIL FC, 33126
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Ismel Croema
Name
Florida street address (P.O. Box NOT acceptable)
Hiami FL 331200 City Zip
City Zip
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S
227
Registered Agent's Signature (REQUIRED)
(CONTINUED)
Page 1 of 2

Title:  "AMBR" = Authorized Member  "MGR" = Manager  MC+L	Name and Address:  JESSICO VUSCILO  DO NO 58 CF  HIGHER R, 33126
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the di	ate of filling: 01/10/2014 (OPTIONAL)
to or 90 days after the date of filing.)  ARTICLE VI: Other provisions, if any.	e specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	and a
(In accordance with section 605.0203-(1) (constitutes an affirmation under the penalti	to an authorized representative of a member.  (b), Florida Statutes, the execution of this document lies of perjury that the facts stated herein are true. Initted in a document to the Department of State and for in s.817.155, F.S.)
TSTORE Typed Filing Fees:	d or printed name of signee
\$125.00 Filing Fee for Articles of C of Registered Agent \$ 30.00 Certified Copy (Optional)	
\$ 5.00 Certificate of Status (Option	onal)

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

ARTICLE IV-

Company: