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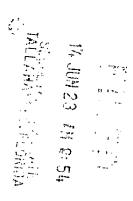
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May 27, 2014

JUAN CARLOS LOYOLA 3001 E FERN ST TAMPA, FL 33610

SUBJECT: JCL AUTO INC Ref. Number: W14000032916

We have received your document for JCL AUTO INC and your check(s) totaling \$180.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

The effective date must be specific and cannot be prior to the date of filing.

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: 914A00011357

Division of Company in D.O. DOV 6207 Wellshames Elevide 2001

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: JCL AUTO 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:
JUAN CARLOS LOYOLA
(Contact Person)
JCL AUTO INC
(Firm/Company)
3001 E FERN ST
(Address)
TAMPA ,FLORIDA, 33610
(City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
JUAN CARLOS LOYOLA at (813) 766-3564
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion and Certificate of Status (\$25 for Articles of Organization) \$150.00 Filing Fees and Certified Copy and Certificate of Status \$180.00 Filing Fees and Certified Copy (Certified Copy, and Certificate of Status)
STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations
Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

June 17, 2014

FLORIDA DEPARTMENT OF STATE

Division of Corporations

PO BOX 6327 Tallahassee, Florida 32314

SUBJECT: JCL AUTO INC

Ref. Number W14000032916

Please find this letter as a notification that I, Juan Carlos Loyola former owner of JCL AUTO INC, herby release the subject name of JCL AUTO INC to my new company which will be resisted as an LLC.

The name for the new company shall be as follows; JCL AUTO, LLC. All other terms will remain the same.

Respectfully,

Juan Carlos Loyola, owner

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

JCL Auto, LLC.	
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:
Principal Office Address: 3001 & FEEN St. TAMPA, FL 33610	Mailing Address: 3001 E. Fern St. TAMPA, FL 33610
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	egistered Agent. You must designate an individual or
The name and the Florida street address of the registered a	gent are:
JUAN CARlOS	Loyola
Name C T C t	tonna
SOOTE, FERN ST. Florida street address (P.O. Box I	MOT agantable)
To m (nd	
17-71) pol	FL 336/0
the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	ice of process for the above stated limited liability company at he appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance rations of my position as registered agent as provided for in 605, F.S.
Register d Agent's Signatu	
Page 1 of 2	TORDE ST

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	To anha Lavala
MGR.	JUAN CARLOS LOYOLA 3001 & FERNST: TAMPA, FL 33610-
	TAMPA, FL 33610-
	,
(Use attachment if necessary)	
ective date is listed, the date must be s of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or
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E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of all (In accordance with section)	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document
REQUIRED SIGNATURE: Signature of all (In accordance with section constitutes an affirmation under that any false into the section of the sec	member or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State
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