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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	o #)
PICK-UP	☐ WAIT	MAIL
(Ві	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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T. SCHROEDER 4-20-15

COVER LETTER

Division of Corporations
SUBJECT: R. COLE TRUCKING, LLC (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:
CYNTHIA COLE (Contact Person) R COLE TRUCKING, LLC (Firm/Company)
3461 LND. AVE SE (Address)
NAPLES, FLORIDA 34117 (City, State and Zip Code)
R COLE TRUCKING FLORIDA @ GMAIL, COM E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person) at (701) 720 - 7127 (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 \$180.00 Filing Fees and Certified Copy (Certificate of Status) \$185.00 Filing Fees and Certified Copy (Certified Copy, and Certificate of Status)
STREET ADDRESS: Registration Section Division of Corporations Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

TO: Registration Section

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of North Dakota (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:
R. COLE TRUCKING, LL C (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: April 15, 2015. (The effective date: 1) cannot be prior to date of receipt or filed date 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 listed in the attached Articles of Organization, if an effective date is listed therein.)
5. The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

Signed this 30th day of March	20_15
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: All Printed Name: Ronal & a Cole	Title: Owner/Member
Signature(s) on behalf of Other Business Entity:	,
Signature: Add the Printed Name: Ronald a Cole	
Printed Name: Renald a Cole	Title: owner
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature: Printed Name:	_ Title:
Signature: Printed Name:	
Printed Name:	Title:
Signature: Printed Name:	773.4
Printed Name:	l'itle:
Signature:Printed Name:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of 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 <u>ALL</u> General Partners.	**************************************
All others: Signature of an authorized person.	
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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
R COLE TRUCKING, LLC (Must end with the words "Limited Liability C	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the princ	ipal office of the Limited Liability Company is:
Principal Office Address:	Aailing Address:
3461 2ND AVE SE Naples, FL. 34117	3461 200 AUE SE Naples, FL. 34117
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	
The name and the Florida street address of the regi	stered agent are:
Cynthia Cole Name	
3461 200 AVE	
Florida street address (P.O. Bo	ox <u>NOT</u> acceptable)
Naples City	FL 34117
City	Zip
liability company at the place designated in thi registered agent and agree to act in this capacity. statutes relating to the proper and complete perf	scept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 605, F.S

(CONTINUED)

Page 1 of 2

Registered Agent's Signature (REQUIRED)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager Ronald A (de "AMBR"	RONALD A. COLE 3461 2nd Ave SE
OFFICE MANAGER	Cynthia A. COLE 3461 2ND AVE SE No Oles, FL. 34117
(Use attachment if necessary)	
effective date is listed, the date must be	late of filing: <u>POril 15, 2015</u> (OPTIONA e specific and cannot be more than five business d
ffective date is listed, the date must be days after the date of filing.)	
effective date is listed, the date must be days after the date of filing.) CLE VI: Other provisions, if any.	
effective date is listed, the date must be days after the date of filing.)	
CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member	or an authorized representative of a member. (b), Florida Statutes, the execution of this document ties of perjury that the facts stated herein are true. mitted in a document to the Department of State
REQUIRED SIGNATURE: Signature of a member of an accordance with section 605.0203 (1) onstitutes an affirmation under the penalt am aware that any false information subronstitutes a third degree felony as providents.	or an authorized representative of a member. (b), Florida Statutes, the execution of this document ties of perjury that the facts stated herein are true. mitted in a document to the Department of State

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

ARTICLE IV-

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