# 19000161691

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to I		
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CORETARY OF STATE

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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 4, 2015

VIKTORS KAMBALOVS LEO TRUCKING LLC 961 WYNFIELD CIRCLE SAINT AUGUSTINE, FL 32092

SUBJECT: LEO TRUCKING LLC Ref. Number: W15000031219

We have received your document for LEO TRUCKING 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 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.

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 contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L12000125747 LEO'S TRUCKING LLC.

The effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

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.

Stacey M Mason Regulatory Specialist II

www.sunbiz.org

Letter Number: 915A00009090

To: +18502456030 Fax: +18502456030

Page 4 of 8 09/23/2015 1:24 PM

# **COVER LETTER**

•	tion Section of Corporations		
SUBJECT: LE	O-TRUCKING-LLC	LEO UNITED LLC	
SCHOLOT.		ame of Resulting Florida I	Limited Company)
			n, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all	correspondence conce	rning this matter to:	
VIKTORS KAI	MBALOVS		
	(Contact Person)	<del></del>	
FEO-THACKI	NO LLC LEO UNITI	ED LLC	
	(Firm/Company)		
961 WYNFIEL	.D CIRCLE		
	(Address)		
SAINT AUGU	STINE, FL 32092		
	(City, State and Zip Co	ode)	
leotrucking.vid	tor@gmail.com		
E-mail Address	: (to be used for future annu	sal report notifications)	
For further info	rmation concerning this	s matter, please call:	
Hotena Janus	kevicius	at (415	738-0467
(Name of	Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a ch	eck for the following a	mount:	
☐ \$150.00 Filing (\$25 for Conversion & \$125 for Article of Organization)	n and Certificate of	ees S180.00 Filing I and Certified Copy	
STREET ADD Registration Ser Division of Cor Clifton Building 2661 Executive Tallahassee, FL	ction porations 5 Center Circle	Registra Division P. O. Bo	NG ADDRESS: ation Section a of Corporations bx 6327 ssee, FL 32314

INHS11 (02/14)

# Articles of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

The Articles of Conversion	n and attached	Articles of Org	<u>anization</u> are su	bmitted to conver	t the follow	/ing
"Other Business Entity"	into a Florida	Limited Liabilit	ty Company in a	accordance with s	.605.1045.	Florida
Statutes.						

LEO TRUCKING LLC (Ente	r Name of Other Business Emity)
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 incorpora	ted under the laws of NORTH CAROLINA
on 09/24/2013 (date of organization, formation or inco	(Enter state, or if a non-U.S. entity, the name of the country)
3. The name of the Florida Limited LEO TRUCKING LLC LEO UNIT	Liability Company as set forth in the attached Articles of Organization ED LLC
LEO TRUCKING LLC LEO UNIT	
LEO TRUCKING LLC LEO UNIT	ED LLC  f Florida Limited Liability Company)
4. If not effective on the date of filis (The effective date: 1) cannot be a date this document is filed by the	ED LLC

Page 1 of 2



Signed this 18 day of APRIL	20_15		
Signature of Authorized Representative of Limit	ed Liability Company:		
Signature of Authorized Representative: Printed Name: VIKTORS KAMBALOVS	Pille: MANAGER	·	·
Signature(s) on behalf of Other Business Entity:	See below for required signatu	re(s).]	
Signature: Printed Name: THE TORI KAMBALOV	Title: OCEANIZER		
Signature:			
Signature:Printed Name:			
Signature: Printed Name:	_Title:	Administration of the second o	
Signature:Printed Name:	Title:	minimals of Day (March 1997) and the Strick of	
Signature: Printed Name:			
Signature: Printed Name:	Title:	***************************************	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.			
If Florida General Partnership or Limited Liabilit	y Partnership:		
Signature of one General Partner.			
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:		
All others: Signature of an authorized person.			
Fees:		2015	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	SEP 22 P	
F	Page 2 of 2	3: 35 ORIDA	*,

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

### TEO TRUCKING LLG LEO UNITED LLC

(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:** 

961 WYNFIELD CIRCLE

SAINT AUGUSTINE, FL 32092

961 WYNFIELD CIRCLE SAINT AUGUSTINE, FL 32092

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:

VIKTORS KAMBALOVS

Name

961 WYNFIELD CIRCLE

Florida street address (P.O. Box NOT acceptable)

SAINT AUGUSTINE

ET 32002

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

AR	TI	$\mathbf{CI}$	Æ.	IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	VIKTORS KAMBALOVS 961 WYNFIELD CIRCLE SAINT AUGUSTINE, FL 32092
**************************************	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the (If an effective date is listed, the date must to or 90 days after the date of filing.)	date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	Production Assessment
Signature of a morpher (In accordance with section 605.0203 (I constitutes an affirmation under the penal	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
VIKTORS KAMBAL	OVS

Filing Fees:

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Page 2 of 2

Typed or printed name of signee