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(Re	questor's Name)			
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PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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SECRETARY OF STATE TALLAHASSEE FLORIDA

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## **COVER LETTER**

Division of Corporations
SUBJECT: Jand W Transportation Services 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:
JoDi J Gwosdz (Contact Person)
(Contact Person)  Jand WTRANSPORTATION SERVICES LLC.  (Firm/Company)
100 PINE CIRCLE DR (Address)
LAKE MARY, FL 32746 (City, State and Zip Code)
LAKE MARY, FL 32746  (City, State and Zip Code)  Jandwtran Sportation 1 @ yahoo. Com  E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
ToDi Gwosdz at (407) 607-6741  (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\Bigcup \\$150.00 \text{ Filing Fees} \\ (\$25 \text{ for Conversion} \\ & \text{S125 for Articles} \\ \text{of Organization}\\ \end{array}\$ \text{Certificate of Status} \\ \end{array}\$ \$\Bigcup \\$180.00 \text{ Filing Fees} \\ \text{and Certified Copy} \\ \text{certified Copy, and Certificate of Status} \\ \end{array}\$
STREET ADDRESS: MAILING ADDRESS:
Registration Section  Division of Corporations  Clifton Building  Registration Section  Division of Corporations  P. O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

TO: Registration Section



## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 28, 2016

JODI GWODZ 100 PINE CIRCLE DRIVE LAKE MARY, FL 32746

SUBJECT: J AND W TRANSPORTATION SERVICES LLC

Ref. Number: W16000052471

1:

We have received your document for J AND W TRANSPORTATION SERVICES LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law does not allow a sole proprietorship to file a conversion. A sole proprietorship is a business owned and operated by one individual. As a sole proprietor, the one individual owner is responsible for making all of the business decisions and all of the debts of the business are considered to be the debts of the one individual owner, as well. The sole proprietorship may or may not conduct business under the one individual owner s legal name. Because the business and the individual are considered as one organization and need each other to co-exist from a legal perspective, a sole proprietorship is not considered a business entity and cannot, therefore, file a conversion under Florida law.

If your sole proprietorship is actually owned and operated by two or more individuals and those individuals serve in the capacity of a partner, your business may not be a sole proprietorship. Your business may meet the definition of a partnership in accordance with Chapter 620, Florida Statutes. Chapter 620, Florida Statutes, allows a partnership to file a conversion. However, the partnership must first file a statement of registration in accordance with section 620.8105, Florida Statutes.

We are enclosing a statement of registration should your business entity meet the criteria of a partnership and you wish to proceed with the conversion. Please note the fee to register a partnership is \$50. To proceed with the conversion, please correct your conversion documents to reflect your current business entity is a partnership and resubmit the conversion documents along with the enclosed registration statement and an additional fee of \$50.

This office strongly suggests that you seek legal advice concerning this matter.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Jana W Transportation (Must end with the words "Limited Liability)	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
100 PINE CIRCLE DR LAKE MARY, FL 3-2746	Jand W Transportation Services 100 PINE CIRCLE DR LL LAKE MARY, FL 32746
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

The name and the Florida street address of the registered agent are:

ARTICLE I - Name:

The name of the Limited Liability Company is:

business entity with an active Florida registration.)

Name

Name

Name

No PINE CROLE DR

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

LAKE MARY

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 (REQURED)

(CONTINUED)

Page 1 of 2

Company:	<i>;</i>	
Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
MGR	TOPI J GWUSPZ	
<del></del>	100 PINE CIRCLE I	DR
	LAKE MARY, FL 33	2746
MGR	WILLIAM C GWOST	72
	100 PINE CIRCLE T	DR.
	LAKE MARY, FL 36	2746
		Dec -
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(Use attachment if necessary)		0
(Ose attachment if ficeossary)		<b>0</b> 6 6
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.)	be specific and cannot be more tha	an five business days prior
Note: If the date inserted in this block does not meet		this date will not be listed as the
document's effective date on the Department of State'	s records.	
ARTICLE VI: Other provisions, if any.		_
JODI J GWOSDZ 15 TO HAVE WILLIAM C. GWOSDZ B TO H	2 90% OUNERSHIP INS	SAID LLC, AND
WILLIAM C. GWOSTIZ B TO A	AVE 10% OWNERSHIP IN	I SAID LLC.
REQUIRED SIGNATURE:		
mal.	Muso 3. AC	
Signature of a membe	r or an authorized representative of	of a member.
This document is executed in a	ccordance with section 605.0203 (1) (b), Flonation submitted in a document to the Depart	orida Statutes.
	as provided for in s.817.155, F.S.	ment of state
x Dodi 6	71005d2	
Ty	ped or printed name of signee	
6125 00 Filing For for Artista	Filing Fees  f Organization and Designation of	Domintowed Ameri

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) Page 2 of 2

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

ARTICLE IV-