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EFFECTIVE DATE 10/24/12

10/28/16

#### **COVER LETTER**

Tallahassee, FL 32301

#### **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.

(P16-078384) (E	Enter Name of Other Business Entity)	
2. The "Other Business Entity" is	CORPORATION	
	(Enter entity type: Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorpo	orated under the laws of FLORIDA	
09/26 2016	(Enter state, or if a non-U.S. entity, the name of the	country)
on (date of organization, formation or i	neorporation)	
3. The name of the Florida Limit	ed Liability Company as set forth in the attached Articles of Or	ganization:
	ne of Florida Limited Liability Company)	
(Enter Nan	ic or Fronda Lunded Liability Company)	
	• • •	
4. If not effective on the date of f (The effective date: 1) cannot b date this document is filed by th date listed in the attached Artic	filing, enter the effective date:  10/24/2016  The prior to date of receipt or filed date nor more than 90 days are Florida Department of State; AND 2) must be the same as the less of Organization, if an effective date is listed therein.)  The location is an effective date in the location of the statutory filing requirements, this date will not be	he effective

Page 1 of 2

Signed this 24	day of OCTOBER	20_16
Signature of Au	thorized Representative of Li	mited Liability Company:
611 A A	horized Representative:	5270—
Printed Name: TA	MARA SOTO	Title: MANAGER
Signature(s) on l	behalf of Other Business Entity	:  See below for required signature(s)
Signature:		- NDD
Printed Name: JOS	SE-R RODRIGUEZ	Title: AMBR
Signature	Pleitos.	
Printed Name: PR	EDO FLEITES CASTRO	Title: AMBR
Signature:		
Printed Name:		Title:
Simptura		
Printed Name:		Title:
	A CONTRACTOR OF THE PROPERTY O	
Signature:		Land Address of the Control of the C
Printed Name:		Title:
Signature:		Title:
rimed Name,		Title.
	oration: irman, Vice Chairman, Director, officers have not been selected, an	
If Florida Gener Signature of one	r <mark>al Partnership or Limited Liab</mark> General Partner.	ility Partnership:
	ed Partnership or Limited Liab L General Partners.	ility Limited Partnership:
All others: Signature of an a	uthorized person.	
Fees:		
Fees for Certified	of Conversion: Florida Articles of Organization Copy: te of Status:	\$25.00 : \$125.00 \$30.00 (Optional) \$5.00 (Optional)

Page 2 of 2

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	:	
TAMY'S TRUCKING LLC		
(Must end with the words "Limited Liabi	ility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the p	orincipal office of the Limited Liabil	ity Company is:
Principal Office Address:	Mailing Address:	
3767 GOLDEN GATE BLVD E NAPLES, FLORIDA 34120	3767 GOLDEN GATE BLVD E NAPLES, FLORIDA 34120	
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)		
The name and the Florida street address of the	registered agent are:	
TAMARA SOTO		
Nam	e	
3767 GOLDEN GATE BLVD E		
Florida street address (P.C	D. Box NOT acceptable)	
NAPLES	FL 34120	
City	Zip	
Having been named as registered agent and a liability company at the place designated is registered agent and agree to act in this capacistatutes relating to the proper and complete accept the obligations of my position as reaccept the Registered Agent's Sig	n this certificate, I hereby accept the city. I further agree to comply with the performance of my duties, and I am figistered agent as provided for in Cha	appointment as he provisions of all familiar with and
(CONTIN	NUED)	

Page 1 of 2

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

<u>Title:</u>	Name and Address:
" $\Lambda$ MBR" = $\Lambda$ uthorized Mem	ber
"MGR" = Manager	
AMBR	JOSE R RODRIGUEZ
	1060 WILSON BLVD N
	NAPLES, FL 34120
AMBR	PEDRO FLEITES CASTRO
	2703 W JUNEAU ST
	TAMPA, FL 33614
MOR	
MGR	TAMARA SOTO
	3767 GOLDEN GATE BLVD E
	NAPLES, FL 34120
(Use attachment if necessary)	
(If an effective date is listed, the dat to or 90 days after the date of filing.)	not meet the applicable statutory filing requirements, this date will not be listed as the
ARTICLE VI: Other provisions, if an	y.
	6 60
REQUIRED SIGNATURE:	100 ST 10
This document is exec I am aware that any fal	member or an authorized representative of a member, uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ce felony as provided for in s.817.155, F.S.
TAMARA SOTO	55

Typed or printed name of signee

### Filing Fees

\$125.00 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