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(Re	questor's Name)	_
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	100
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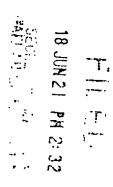
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COVER LETTER

TO:	New Filing Son Division of C					
SUBJ	JECT: Elite Tear	m Logistics LLC				
	<u>-</u>	(Name of Re	sulting Florida Limit	ed Company	<i>'</i>)	-
The e Busin	nclosed Articlesess Entity" into	s of Conversion, Artic a "Florida Limited Li	les of Organization	on, and fee " in accord	es are submitted to dance with s. 605.10	convert an "Other 045, F.S.
Please	e return all corre	espondence concernin	g this matter to:			
Brian	Calciano, Esq.					
Drian	Calciano, P.A.	(Contact Person)				
Dilaii.	Calciallo, F.A.	/F:/C				
146.2-	id St. N., Suite 310	(Firm/Company)				
	10 St. 14., June 510	(Address)				
St. Pet	ersburg, FL 33701	•				
	((City, State and Zip Code)				
brian.h	nenkel@eliteteamle	ogistics.com				
E-r	nail Address: (to b	e used for future annual re	port notifications)			
For fu	rther information	on concerning this ma	tter, please call:			
Brian	Calciano, Esq.		at (727	202-4516		
	(Name of Conta	ct Person)	(Area Code)	(Daytime	Telephone Number)	•
		or the following amou a bank located in the		ocessed b	y this office must b	e payable in US
(\$25 fc & \$125	0.00 Filing Fees or Conversion of for Articles anization)	□\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Copy	y Cer	\$185.00 Filing Fees, rtified Copy, and rtificate of Status	18 JUN
New I Divisi Clifto 2661	EET ADDRESS Filing Section on of Corporati n Building Executive Center nassee, FL 3230	ions er Circle	New Fil Division P. O. Bo	NG ADDI ing Section of Corpo ox 6327 ssee, FL 3	on orations	21 77 2:32

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: te Team Logistics LLC	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Limited Liability Company	
(Enter entity type. Example: corporation, limited partnership, general partnership, common li	aw or business trust, etc.)
First organized, formed or incorporated under the laws of	
(Enter state, or if a non-U.S. entity, the na	me of the country)
August 8, 2016 on	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Article	es of Organization:
Elite Team Logistics LLC	
(Enter Name of Florida Limited Liability Company)	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 of the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	•
5. The plan of conversion has been approved in accordance with all applicable statutes.	
6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	rights the amount to
	(A) (A)

Signed this 29th day of June	20_18		
Signature of Authorized Representative of Limi		. 1	
Signature of Authorized Representative: Brinted Name: Brian Henkel	Chant for Prion Han Title: Authorized Member	,ke)	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)		
Signature: Printed Name: Brian Henkel	Title: Authorized Member		
Signature:Printed Name:	_ Title:		
Signature:Printed Name:			
Signature:Printed Name:	Title:		
Signature:Printed Name:	Title:		
Signature:Printed Name:	_ Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers or Officers have not been selected, an Inc.			
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:		
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:		<u></u>
All others: Signature of an authorized person.			B Ti
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)	FR 2:32	· · · · · · · · · · · · · · · · · · ·

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Pro Wall College		
Efite Team Logistics LLC (Must contain 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 L.	iability Company is:
Principal Office Address:	Mailing Address:	
10764 70th Ave.	10764 70th Ave.	
Unit 1305	Unit 1305	
Seminole, Fl. 33772 ARTICLE III - Registered Agent, Regi	Seminole, FL 33772 stered Office, & Registered Agent'	s Signature:
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	istered Office, & Registered Agent' on Registered Agent. You must designate an indiv	
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	istered Office, & Registered Agent' on Registered Agent. You must designate an indiv	21
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	istered Office, & Registered Agent' on Registered Agent. You must designate an indiv	21 77
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	istered Office, & Registered Agent' in Registered Agent. You must designate an individe of the registered agent are: Name	27 77 22 3
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Brian Calciano, P.A. 146 2nd Street North, Sui	istered Office, & Registered Agent' in Registered Agent. You must designate an individe of the registered agent are: Name	27 77 22 3
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Brian Calciano, P.A. 146 2nd Street North, Sui	istered Office, & Registered Agent' on Registered Agent. You must designate an individe the registered agent are: Name ite 310-DD	27 77 22 3

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)

"MGR" = Manager	
AMBR	Brian Henkel
	10764 70th Ave, Unit 1305
	Seminole, FL 33772
	
	3
	<u></u>
	<u></u>
Use attachment if necessary)	
LE V: Other provisions, if any.	
22 V. Other provisions, it any.	
7. Other provisions, it ally.	
REQUIRED SIGNATURE:	
	(Roi - 1/
REQUIRED SIGNATURE:	for Brigon He
REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance	an authorized representative of a member e with section 605,0203 (1) (b), Florida Statutes. I am aware that the Department of State constitutes a third degree felority

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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

ARTICLE IV-

Company: