# L1900065864

(Requestor's Name)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W19-16846

Office Use Only



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2019 FEB 13 PH 3: 31

# **COVER LETTER**

TO:	Division of C						
SURI	ECT: SWEETH	EART LOGISTICS LLC					
3010	LC1.	(Name of Res	ultin	g Florida Limi	ted C	ompan	у)
		•		_			tes are submitted to convert an "Other rdance with s. 605.1045, F.S.
Please	e return all corr	espondence concerning	g thi	s matter to:			
MARI	A FERSACA						
	<del></del>	(Contact Person)			-		
MFF 8	& ASSOCIATES I	LC					
	·	(Firm/Company)			-		
142 N	W 37TH ST						
		(Address)		<del></del>	-		
MIAM	II, FL 33127						
	(	City, State and Zip Code)			-		
ADMI	N@MFFASSOCI	ATES.COM					
E-1	nail Address: (to b	e used for future annual re	port	notifications)	-		
For fi	ırther informati	on concerning this ma	tter,	please call:			
MARI	A FERSACA		яt	(	842	2-0071	
•	(Name of Contr	act Person)		(Area Code	(C	aytime	Telephone Number)
		for the following amou a bank located in the			огос	essed	by this office must be payable in US
(\$25 fc & \$125	60.00 Filing Fees or Conversion 5 for Articles anization)	□\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing d Certified Co		C	1\$185.00 Filing Fees, ertified Copy, and ertificate of Status
	EET ADDRES	S:					DRESS:
	Filing Section	ions		New F			oonations
	ion of Corporat on Building	IOHS		P. O. I			OCIACIONS
	Executive Cent	er Circle		_			32314

Tallahassee, FL 32301

## **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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: SWEETHEART LOGISTICS INC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
10/02/2018 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: SWEETHEARTLOGISTICS LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after 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 will not be listed as the 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 rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

FILED
2019 FEB 13 PM 3:31
SECRETARY OF STATE
ALLAHASSEE, FE DONE

Signed this 26	day of FEBRUARY	20 19 .
Signature of Autl	horized Representative of Lim	ited Liability Company:
Signature of Author	orized Representative:	
Printed Name: WILI	orized Representative:	Title: MGR
Signature(s) on be	half of Other Business Entity:	[See below for required signature(s)]
Signature: WHT		
Signature: M	(11)(37)(3)	Title: DIRECTOR
Printed Name: WILI	LIAM CRAIG	Title: DIRECTOR
Signature: Call	11	
Printed Name: CAR	LOS MARTINEZ	Title: DIRECTOR
r rinted ramie.		Tide. Blactor
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
C:		
Signature:		Tr'-1
rnnied Name:		Title:
Signature:		
Printed Name:		Title:
<del></del>		
If Florida Corpora		
Signature of Chairn	nan, Vice Chairman, Director, or	Officer.
If Directors or Office	cers have not been selected, an In	corporator must sign.
(EE) - 12 - C - 1	<b>T</b>	
Signature of one Ge	Partnership or Limited Liabili	ty Partnership:
orginature of othe Ge	eneral Partifer.	
If Florida Limited	Partnership or Limited Liabili	ty Limited Partnershin:
Signatures of ALL		Tanaca Taranci singi
All others:		
Signature of an auth	orized person.	
Fees:		
Apaintes - C	C	#DE OO
	Conversion:	\$25.00
	orida Articles of Organization:	\$125.00
Certified Co		\$30.00 (Optional)
Certificate of	or Status:	\$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company i	is:
SWEETHEART LOGISTICS LLC	
(Must contain the words "Limited Liab	ility 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:
2020 BAYSHORE DR UNIT 2504	2020 BAYSHORE DR UNIT 2504
MIAMI, FL 33137	MIAMI, FL 33137
ARTICLE III - Registered Agent, Register (The Limited Liability Commany cannot serve as its own Re- business entity with an active Florida registration.)	red Office, & Registered Agent's Signature: ppstered Agent, You must designate an individual or another
The name and the Florida street address of th	e registered agent are:
MFF & ASSOCIATES LLC	
Na	urie
142 NW 37TH ST	
Florida street address (P	P.O. Box NOT acceptable)
MIAMI	FL 33127
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)

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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	WILLIAM CRAIG
MOR	2020 BAYSHORE DR UNIT 2504
	MIAMI, FL 33137
	THE CITE IS SOLD!
MGR	CARLOS MARTINEZ
	6301 POWERLINE ROAD
	FORT LAUDERDALE, FL 33309
	<u> </u>
(I loo otto-beneat if annual )	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
DE V. Outer provisions, it any.	
REQUIRED SIGNATURE:	
MICH	
Signature of a member or	an authorized representative of a member
Signature of a member or This document is executed in accordance	with section 605.0203 (1) (b). Florida Statutes, I am aware t
Signature of a member or This document is executed in accordance	with section 605.0203 (1) (b). Florida Statutes, I am aware t
Signature of a member or This document is executed in accordance any false information submitted in a docu	with section 605.0203 (1) (b). Florida Statutes, I am aware ti
Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S.  WILLIAM CRAIG	an authorized representative of a member of with section 605.0203 (1) (b), Florida Statutes. I am aware the under to the Department of State constitutes a third degree felocyped or printed name of signee
Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155, F.S.  WILLIAM CRAIG	e with section 605.0203 (1) (b), Florida Statutes. I am aware the timent to the Department of State constitutes a third degree felo

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