L19000141336

(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	



03/08/19--01014--003 **185.00

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SECRET SEAL ORDA

Office Use Only

N CULLIGAN JUN 4 2019

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: Samuel Express, LLC.		
(Name of Res	sulting Florida Limite	d Company)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited Li		on, and fees are submitted to convert an "Othe" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:	
Marino Petique		
(Contact Person)		
Samuel Express, LLC.		
(Firm/Company)		
8721 N Orangeview Ave		
(Address)		
Tampa, FL 33617		
(City, State and Zip Code)		
samuelexpress04@gmail.com		
E-mail Address: (to be used for future annual re	port notifications)	
For further information concerning this ma	itter, please call:	
Jaime Nazario Rodriguez	at (813	(Daytime Telephone Number)
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amoudollars and drawn on a bank located in the	•	ocessed by this office must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certificate of Status	■\$180.00 Filing I and Certified Copy	
STREET ADDRESS:	MAILI	NG ADDRESS:
New Filing Section		ing Section
Division of Corporations Clifton Building	Divisior P. O. Bo	of Corporations
2661 Executive Center Circle		see, FL 32314

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 18, 2019

MARINO PETIQUE 8721 N ORANGEVIEW AVE TAMPA, FL 33617

SUBJECT: SAMUEL EXPRESS, LLC

Ref. Number: W19000026205

We have received your document for SAMUEL EXPRESS, 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):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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) 245-6052.

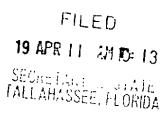
Letter Number: 119A00005345

Terri J Schroeder Regulatory Specialist III

www.sunbiz.org

gio.aidina.ww

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.

Samuel Express, 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)
12/12/2003 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:
Samuel Express, LLC.
Samuel Express, LLC.
Samuel Express. LLC. (Enter Name of Florida Limited Liability Company)

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.

Signed this 24th day of February	20_19
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	
Signature of Authorized Representative: Printed Name: Marino Petigue	Title: Chairman
Trined (value, married edge)	Title:
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature:	
Printed Name Migno Perque	Title: Chairman
Signature Wique Corrique	
Printed Name: Miguel Rodriguez	Title: President
, , , , , , , , , , , , , , , , , , ,	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
61	
Signature:Printed Name:	Trial
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Tranco rume.	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
	\$25.00 \$135.00
Fees for Florida Articles of Organization:	\$125.00 \$20.00 (Ontional)
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

0 12 11	0		
Samuel Express, LL	C. Must contain the words "Limited Lial	oility Company, "L.L.C.," or "LLC.")	
ADTICLE II. A	. 		
ARTICLE II - A The mailing addre	ess and street address of the	principal office of the Limited I	Liability Company is
Principal Office		Mailing Address:	
8721 N Orangeview	Ave	P O Box 11547	
Tampa, FL 33617 ARTICLE III - (The Limited Liability	Registered Agent, Registe	red Office, & Registered Agent egistered Agent. You must designate an ind	t's Signature: ividual or another
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Registe Company cannot serve as its own Re	red Office, & Registered Agent egistered Agent. You must designate an ind	t's Signature: ividual or another
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Registe Company cannot serve as its own Re n active Florida registration.) e Florida street address of th Jaime Nazario Rodriguez	red Office, & Registered Agent egistered Agent. You must designate an ind ne registered agent are:	ividual or another
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Registe Company cannot serve as its own Re n active Florida registration.) e Florida street address of th Jaime Nazario Rodriguez	red Office, & Registered Agent egistered Agent. You must designate an ind	ividual or another
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Registe Company cannot serve as its own Re n active Florida registration.) e Florida street address of th Jaime Nazario Rodriguez Na 9408 Glenrosa Court	red Office, & Registered Agent egistered Agent. You must designate an ind ne registered agent are:	ividual or another
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Registe Company cannot serve as its own Re n active Florida registration.) e Florida street address of th Jaime Nazario Rodriguez Na 9408 Glenrosa Court	red Office, & Registered Agent egistered Agent. You must designate an ind ne registered agent are:	ividual or another
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Registe Company cannot serve as its own Re n active Florida registration.) e Florida street address of th Jaime Nazario Rodriguez Na 9408 Glenrosa Court	red Office, & Registered Agent egistered Agent. You must designate an ind ne registered agent are:	FIL SECULARIASS

ed 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)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMBR	Marino Petique	
	8721 N Orangeview Ave	
	Tampa, FL 33617	
AMBR	Miguel Rodriguez	
	P O Box 11547	
	Tampa, FL 33680	
		
	——————————————————————————————————————	<u>~ ;</u>
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		<u> </u>
(Use attachment if necessary)	V.	·
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CLE V: Other provisions, if any.	<u>'</u>	
one provisions, it may.	á	5 - C
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Signature of a member or an authorized representative of a member

This document is executed in accordance with section 05.0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

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)