419000216416

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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(Document Number)
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

2019 AUG 29 PH 4: 22

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COVER LETTER

Division of C	orporations			
SUBJECT:	K.D.A. TRAN	SPORT, LLC		
	(Name of Res	sulting Florida Limi	ed Cor	npany)
				nd fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
JOSE E VANEGAS				
	(Contact Person)	·	-	
K.D.A. 7	Transport 6	1C.		
	(Firm/Company)		•	
51 W 64TH ST				
	(Address)		-	
HIALEAH, FL 33012				
(1	City, State and Zip Code)		•	
SAELMY1202@GMAII	COM			
E-mail Address: (to b	e used for future annual re	port notifications)	-	
For further informati	on concerning this ma	tter, please call:		
JOSE E VANEGAS		at (⁷⁸⁶	1286-9)299
(Name of Conta	ict Person)		(Day	ytime Telephone Number)
	or the following amou a bank located in the		roces:	sed 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 and Certified Co		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES	S:	MAIL	ING /	ADDRESS:
New Filing Section		New F	ling S	Section
Division of Corporat	ions			Corporations
Clifton Building 2661 Executive Cent	er Circle	P. O. F Tallah:		FL 32314
ZOOT EXCEUTIVE CETT	CI CIICIC	Tanana	13300.	11. 34314

Tallahassee, FL 32301

TO: New Filing Section

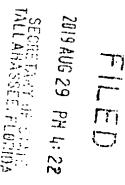
Articles of Conversion For "Other Business Entity" Into

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: K.D.A. TRANSPORT, 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.
(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)
on 06/18/2019 (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
K.D.A. TRANSPORT, 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.



Signed this <u>08TH</u> day of <u>JULY</u>	20 <u>19</u>
Signature of Authorized Representative of Lim	· · · · · · · · · · · · · · · · · · ·
Signature of Authorized Representative: Printed Name: JOSE E VANEGAS	L Vamaa in
Printed Name: JOSE E VANEGAS	Title: MGR
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature:	
Printed Name: 105 F 1/2 P C C C	Title: Proside of
Timed Name: Jose CVarsen 45	Title, President
C' 1/	
Printed Name:	Title:
Signature:Printed Name:	epr. 1
rfinted Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an In	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnershin
Signature of one General Partner.	to the control of the
-	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
	60 - 00
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Ontignal)
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)
Certificate of Status,	55.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the L	imited Liability Compa	iny is:
K.D.A. TRANSPOR		Liability Company, "L.L.C.," or "L.L.C.")
ARTICLE II - A	ddroee:	
		the principal office of the Limited Liability Company is:
Principal Office	Address:	Mailing Address:
JOSE E VANEGAS		51 W 64TH ST HIALEAH, FL 33012
	n St. Fl. 33012	
Halean	1 5 3010	
(The Limited Liability C		stered Office, & Registered Agent's Signature: m Registered Agent. You must designate an individual or another
The name and the	Florida street address o	of the registered agent are:
	JOSE E VANEGAS	Name
	51 W 64TH ST	s (P.O. Box NOT acceptable)
	Piorida street addres	s (r.o. box <u>nor</u> acceptable)
	HIALEAH	FL 33012
	City	Zip
liability com registered agent statutes relatir	pany at the place design and agree to act in this ng to the proper and com	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all aplete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S

(CONTINUED)

ARTICLE IV-

JOSE E VANEGAS

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	
MGR	JOSE E VANEGAS
	51 W 64TH ST
	HIALEAH, FL 33012
	
(Use attachment if necessary)	
(,,,,,,,,,,,,	
LE V: Other provisions, if any.	
DE V. Other provisions, if any.	
	
	
REQUIRED SIGNATURE:	
for y Jameson	
Signature of a member or	an authorized representative of a member
This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes, I am aware
any false information submitted in a doct	ament to the Department of State constitutes a third degree
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)