L19000278396

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

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10/28/19--01032--021 **150.00

COVER LETTER

TO: New Filing Division of	Section Corporations				
SUBJECT: JEALS					
SUBJECT:		sulting Florida Limited Co	mpany)		
The enclosed Artic Business Entity" in	les of Conversion, Artic nto a "Florida Limited L	eles of Organization, ar iability Company" in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.		
Please return all co	orrespondence concerning	g this matter to:			
FABIO ALZATE					
	(Contact Person)				
JEALSE SCOOTERS	, INC				
	(Firm/Company)				
512 OSCEOLA PKW	Y				
	(Address)				
KISSIMMEE, FL 347	44				
	(City, State and Zip Code)				
DAVID@RCTAXSEF	RVICE.COM				
E-mail Address: (to	be used for future annual re	port notifications)			
For further informa	ition concerning this ma	tter, please call:			
		_at ()	vtime Telephone Number)		
(Name of Cor	ntact Person)	(Area Code) (Day	rtime Telephone Number)		
Enclosed is a check dollars and drawn of	for the following amou on a bank located in the	int: (All checks proces: United States)	sed by this office must be payable in US		
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
STREET ADDRE	SS:	MAILING A	ADDRESS:		
New Filing Section		New Filing S			
Division of Corpora Clifton Building	ations	Division of C P. O. Box 63	•		
2661 Executive Cer	nter Circle	Tallahassee,			

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.

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 17	day of <u>OCTOBER</u>	20_19
	orized Representative of Lim	
Signature of Author	orized Representative: T	To king S
Printed Name: FABI	O ALZATE	Title: AMBR
Timed (vinio)	- U	
Signature(s) on be	half of Other Business Entity:	[See below for required signature(s)]
	7	
Signature:	majues.	
Printed Name: FABI	OAEZATE	Title: PRESIDENT
Signature:		
Printed Name:		Title:
rimed rame.		
Signature:	<u> </u>	
Printed Name:		Title:
G:		
Signature:		77' 1
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		771.1
Printed Name:		Title:
If Florida Corpora	ition.	
	nan. Vice Chairman, Director, or	Officer
	ters have not been selected, an In	
<u>If Florida General</u>	Partnership or Limited Liabili	ty Partnership:
Signature of one Ge	eneral Partner.	
If Florida Limited	Partnership or Limited Liabili	ty Limited Partnership
Signatures of <u>ALL</u>	General Partners.	ty Emitted rarinership.
Ail others:		
Signature of an auth	orized person.	
Fees:		
A	G	02.5.00
	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 is	:
JEALSE SCOOTERS US, LLC	
(Must contain the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	orincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
512 E. OSCEOLA PKWY	512 E. OSCEOLA PKWY
KISSIMMEE, FL 34744	KISSIMMEE, FL 34744
business entity with an active Florida registration.) The name and the Florida street address of the FABIO ALZATE	
Nam	ic.
512 E. OSCEOLA PKWY	
Florida street address (P.C	D. Box <u>NOT</u> acceptable)
KISSIMMEE	FL 34744
City	Zip
liability company at the place designated in registered agent and agree to act in this capact statutes relating to the proper and complete accept the obligations of my position as re	to accept service of process for the above stated limited in this certificate. I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 605, F.S

(CONTINUED)

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

Title:	Name and Address:			
"AMBR" = Authorized Member				
"MGR" = Manager	E. Dio . I a . Th			
AMBR	FABIO ALZATE			
	512 E. OSCEOLA PKWY			
	KISSIMMEE, FL 34744			
				
(Use attachment if necessary)				
RTICLE V: Other provisions, if any.				
REQUIRED SIGNATURE:				
Signature of a member or a	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony			
FABIO ALZATE				
	ned or printed name of signee			

yped or printed name of s

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)

Electronic Articles of Incorporation For

P07000032866 FILED March 13, 2007 Sec. Of State jshivers

JEALSE SCOOTERS, INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is: JEALSE SCOOTERS, INC.

Article II

The principal place of business address: 512 OSCEOLA PARKWAY KISSIMMEE,, FL. 34744

The mailing address of the corporation is:

512 OSCEOLA PARKWAY KISSIMMEE,, FL. 34744

Article III

The purpose for which this corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The number of shares the corporation is authorized to issue is:

Article V

The name and Florida street address of the registered agent is:

L.L. PROFESSIONAL SERVICES, INC. 7661 CURRENCY DRIVE ORLANDO, FL, FL. 32809

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: MONICA CARMONA

Article VI

The name and address of the incorporator is:

FABIO ALZATE 512 OSCEOLA PARKWAY

KISSIMMEE, FL 34744

Incorporator Signature: FABIO ALZATE

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P FABIO ALZATE 512 OSCEOLA PARKWAY KISSIMME, FL. 34744 P07000032866 FILED March 13, 2007 Sec. Of State jshivers