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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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SECRETARY OF STATE
STATE OF CORPORATES

COVER LETTER

| TO: New Filing Section Division of Corporations | |
|--|---|
| GM GIL EXPRESS LLC | |
| SUBJECT: (Name of Pagelline Class) | 15-2-10 |
| (Name of Resulting Florida | |
| The enclosed Articles of Conversion, Articles of Organ Business Entity" into a "Florida Limited Liability Com | ization, and fees are submitted to convert an "Other pany" in accordance with s. 605.1045, F.S. |
| Please return all correspondence concerning this matter | to: |
| MARTINEZ GIL. GEOVANIS | |
| (Contact Person) | - |
| (Firm/Company) 6700 N ROME AVE LOT 538A | |
| (Address) TAMPA, Fl. 33604 | SECRUGAR 19 NOV 18 |
| (City, State and Zip Code) tdatalte@gmail.com | — 8 FERRY OF CERPOR |
| E-mail Address: (to be used for future annual report notification | ns) |
| For further information concerning this matter, please ca | all: $\frac{1}{3}$ |
| MARTINEZ GIL, GEOVANIS 813 | 2705152 |
| (Name of Contact Person) (Area C | ode) (Daytime Telephone Number) |
| Enclosed is a check for the following amount: (All check dollars and drawn on a bank located in the United States | ks processed 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 Fees and Certified Status | ling Fees |
| New Filing Section New Division of Corporations Division Building P. C | ILING ADDRESS: Filing Section ision of Corporations D. Box 6327 ahassee, FL 32314 |

INHS11 (7/17)

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" immediate GM GIL EXPRESS INC | ely prior to the filing of the Articles of Conversion is: |
|--|--|
| (Enter Name of Other Busin CORPORATION 2. The "Other Business Entity" is a | P18000000 749 |
| (Enter entity type. Example: corporation, limited | partnership, general partnership, common law or business trust, etc.) FLORIDA |
| First organized, formed or incorporated under the laws | of |
| 01/03/2018 | (Enter state, or if a non-U.S. entity, the name of the country) |
| on | as set forth in the attached Articles of Organization: |
| (Enter Name of Florida Limited Liab | oility Company) |
| 4. If not effective on the date of filing, enter the effecti | ve date: |
| (The effective date: Cannot be prior to date of receipthe date this document is filed by the Florida Depar Note: If the date inserted in this block does not meet the applicab document's effective date on the Department of State's records. | pt or filed date nor more than 90 calendar days after tment of State.) |
| 5. The plan of conversion has been approved in accorda | ance 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.

\$30.00 (Optional)

\$5.00 (Optional)

Certified Copy:

Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Na The name of the L | ime: Limited Liability Company | ris: | | |
|--|--|---|---|-------------|
| GM GIL EXPRESS | | | | |
| (N | lust contain the words "Limited Lia | ibility Company, "L.L.C.," or "LLC.") | | |
| ARTICLE II - A The mailing addre | | e principal office of the Limite | d Liability Company is: | |
| Principal Office | Address: | Mailing Address: | | |
| 6700 N ROME AVE | | SAME | | |
| LOT 538A | | | | |
| TAMPA, FL 33604 | | | | |
| (The Limited Liability C business entity with an | cegistered Agent, Registe company cannot serve as its own Reactive Florida registration.) Florida street address of the GEOVANIS MARTINEZ G | _ | ent's Signature: individual or another | SO ROISIARC |
| | Na | ame | | 82 |
| | 6700 N ROME AVE LOT 53 | 88A | | GRPORALIÓHS |
| | Florida street address (F | P.O. Box NOT acceptable) | చ చ | Ai i |
| | TAMPA, | FL 33604 | ట | 147 |
| | City | Zip | | |
| liability comp registered agent statutes relatin | eany at the place designated and agree to act in this cap to the proper and comple. digations of my position as | d to accept service of process for lin this certificate, I hereby according to I further agree to comply the performance of my duties, and registered agent as provided for ignature (REQUIRED) | vept the appointment as wwith the provisions of all ad I am familiar with and | |

(CONTINUED)

| "AMBR" = Authorized Member | |
|--|--|
| "MGR" = Manager | di d |
| _lknl | GEOVANIS MARTINEZ GIL |
| | 6700 N ROME AVE -LOT 538A' |
| · · | TAMPA , FL 33604 U |
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| (Use attachment if necessary) | |
| (Use attachment if necessary) LE V: Other provisions, if any. | |
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| | |
| LE V: Other provisions, if any. | |
| REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance. | r an authorized representative of a member to with section 605.0203 (1) (b), Florida Statutes. I am aware ument to the Department of State constitutes a third degree fe |
| REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a doc as provided for in s.817.155, F.S. GEOVANIS MARTINEZ GIL | te with section 605.0203 (1) (b), Florida Statutes. I am aware ument to the Department of State constitutes a third degree fe |
| REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a doc as provided for in s.817.155, F.S. GEOVANIS MARTINEZ GIL | e with section 605.0203 (1) (b), Florida Statutes. I am aware |

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

ARTICLE IV-

Company: