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SUBJEC	т: <u>С</u>	ل	(Name of R	RUCKI esulting Florida Limite	NG d Company)	LLC	
				icles of Organizatio Liability Company			to convert an "Other 5.1045, F.S.
Please re	urn all cor	respon	dence concerni	ng this matter to:			
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and	K Son	City, St.	ate and Zip Code)	n ited bra	7 nds.	b.z	
For furth		ion con	cerning this m	report notifications) natter, please call: at (Of) (Area Code)	389 (Daytime Tele	-000 (<u>)</u>
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The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32314

P.O. Box 6327

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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
on 07/06/2015 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(Enter Name of Florida Limited Liability Company) 4. If not effective on the date of filing, enter the effective date:
19 DEC 23 - 411 19 DEC 23 - 411 19 DEC 23 - 411

day of December 2019 Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative:
Printed Name: Castin Jean Mary Title: President 6P MGR Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Printed Name: Castin Jean Mary Title: President Signature: Printed Name: Title: Printed Name: ______ Title: _____ Signature: ______ Title: _____ Printed Name: Title: Signature: Printed Name: Title: _____ If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of **ALL** General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

Certified Copy:

-\$30:00 (Optional)

Certificate of Status:

\$5:00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
C. J. M. TRUCKING LLC (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
(Must contain the words "Limited Liability 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:
11033 ENGLENOOK DR SAME JACKSONVILLE FL 32246
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Andrew Ocean
Name
6260-C DUPONT STATION CT E
Florida street address (P.O. Box NOT acceptable)
JACKSONVILLE FL 32217 City Zip
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 propey and complete performance of my duties, and I am familiar with and accept the obligations of the position as registered agent asprovided for in Chapter 605, F.S Registered Agent's Signature (REQUIRED)
(CONTINUED)

ARTICLE IV	А	Κl	IL.	LĽ	LV
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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	CASTIN JEHN MARLY 11033 ENGLE NOOK DR JACKSON VILLE FL 3224
	
(Use and because if a constant)	
(Use attachment if necessary)	
RTICLE V: Other provisions, if any.	
	<u> </u>

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (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)