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Special Instructions to Filing Officer:	

Office Use Only



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w2-4344



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 21, 2020

TREVOR A. LUNAN AVENUE 1 EXPRESS 522 GRANT BLVD LEHIGH ACRES, FL 33974

SUBJECT: AVENUE 1 EXPRESS Ref. Number: W20000004344

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We have received your document for AVENUE 1 EXPRESS and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law does not allow a sole proprietorship to file a conversion. A sole proprietorship is a business owned and operated by one individual. As a sole proprietor, the one individual owner is responsible for making all of the business decisions and all of the debts of the business are considered to be the debts of the one individual owner, as well. The sole proprietorship may or may not conduct business under the one individual owner's legal name. Because the business and the individual are considered as one organization and need each other to co-exist from a legal perspective, a sole proprietorship is not considered a business entity and cannot, therefore, file a conversion under Florida law.

If your sole proprietorship is actually owned and operated by two or more individuals and those individuals serve in the capacity of a partner, your business may not be a sole proprietorship. Your business may meet the definition of a partnership in accordance with Chapter 620, Florida Statutes. Chapter 620, Florida Statutes, allows a partnership to file a conversion. However, the partnership must first file a statement of registration in accordance with section 620.8105, Florida Statutes.

We are enclosing a statement of registration should your business entity meet the criteria of a partnership and you wish to proceed with the conversion. Please note the fee to register a partnership is \$50. To proceed with the conversion, please correct your conversion documents to reflect your current business entity is a partnership and resubmit the conversion documents along with the enclosed corregistration statement and an additional fee of \$50.

This office strongly suggests that you seek legal advice concerning this matter.

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.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 320A00001512

www.sunbiz.org

COVER LETTER

TO:

New Filing Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

SUBJECT: Avenue 1 Express LLC Name of Limited Life life Company
The enclosed Articles of Organization and fee(s) are submitted for filing
Please return all correspondence concerning this matter to the following:
Trevor A Lunan Name of Person
Avenue 1 Express LL C
522 Grant BL vd
Lehigh Acres FL 33974
Lehigh Acres FL 33974 City/State and Zip Code trevor. Lunan a 1 e a gmail. com E-mail address: (to be used for future annual seport notification)
For further information concerning this matter, please call:
Trevor Lunan at (239), 839-0744 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount.
□\$125.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) □\$130.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing Section DivisionDivision of CorporationsThe Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Avenue 1 Expres (Must conatin the words "Limited Liabil	lity Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
522 Grant Blvd	529 Grant Blud

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:

Lehigh Acres, FL 33974

ARTICLE 1 - Name:

The name of the Limited Liability Company is.

Trevor A Lungh

Name

522 Grant Blvd

Florida street address (P.O. Box NOT acceptable)

Lehigh Acres FL 33 974

City State 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 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)

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-1

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Trevor A Lunan 522 Grant Blvd Lehigh Acres, FL 32974
(Use attachment if necessary)	
FICLE V: Effective date, if other than to in effective date is listed, the date mus date of filing.)	the date of filing: 2-15-20 20. (OPTIONAL) st be specific and cannot be more than five business days prior to or 90 days a
	es not meet the applicable statutory filing requirements, this date will not be list artment of State's records.

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.

Trevor A Lunan
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Trevol A Range

\$ 30.00 Certified Copy (Optional)

REOURED SIGNATURE:

S 5.00 Certificate of Status (Optional)