L20000204196

(Re	equestor's Name)	
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	#)
\	,	,
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	e)
·	-	•
	ocument Number)	
(CC	comencivamber)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		}
		ļ

Office Use Only



700346775867

866-30/26 (610)__ 865 (4150.69

2 : 2020

, o liey



	COVER LETTER	•	۵	ý	•
:	•				

SUBJECT: _TANDI GROUP LLC

New Filing Section

Division of Corporations

TO:

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

DILSON S CAPUTO				
	(Contact Person)			
TANDI GROUP LLC				
	(Firm/Company)			
PO BOX 1186				
	(Address)			
WINDERMERE, FL 34	786			
(0	City, State and Zip Code)	<u></u> ,		
DILSON.CAPUTO@HO	DTMAIL.COM			
E-mail Address: (to be	e used for future annual re	port notifications)		
For further information	on concerning this ma	tter, please call:		
DILSON S CAPUTO		at (321)	543-0	0625
(Name of Conta	et Person)	(Area Code)	(Dayt	time Telephone Number)
	or the following amou a bank located in the	•	ocesse	ed 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 F and Certified Copy		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status

Mailing Address:

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: TANDI LOGISTICS GROUP, CORP.
(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.
(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)
03/21/2002
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: TANDI GROUP 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 23 day of JUNE	_ ₂₀	
Signature of Authorized Representative of Limi	ted Liability Company:	
Signature of Authorized Representative: Printed Name: DILSON S CAPUTO	Title: AMBR	
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)	
Signature: Calula Printed Name: TANIA M. CAPUTO	Title: VP	
Signature: Printed Name: DILSON S. CAPUTO	Title: P	
Signature: Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:		
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 Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	mpany is:
TANDI GROUP LLC	
(Must contain the words "Lin	nited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address.	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7826 SKIING WAY	P.O.BOX 1186
WINTER GARDEN, FL 34787	WINDERMERE, FL 34786
The name and the Florida street addre	
DILSON S CAPUTO	Name
7826 SKIING WAY	Name
7826 SKIING WAY	Name Iress (P.O. Box <u>NOT</u> acceptable)
7826 SKIING WAY Florida street add	Name Iress (P.O. Box <u>NOT</u> acceptable) FL 34787

(CONTINUED)

ARTICLE IV-

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	
AMBR	TANIA M. CAPUTO
 	P.O.BOX 2533
	WINDERMERE, FL 34786
AMBR	DILSON S. CAPUTO
	P.O.BOX 2533
	WINDERMERE, FL 34786
	
TICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is executed in accordance	an authorized representative of a member e with section 605,0203 (1) (b). Florida Statutes. I am aware that ument to the Department of State constitutes a third degree felong
DILSON S. CAPUTO	
Ty	yped or printed name of signee
Ту	yped 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)