L20000371166

(Req	uestor's Name)	
(Add	ress)	
- LAdd	iress)	
(**************************************		
(City	/State/Zip/Phone #)	i
☐ PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Name)	
(Doc	cument Number)	
Certified Copies	Certificates of	Status
		·
Special Instructions to F	iling Officer:	
•		

Office Use Only



900355236219

11/24/20--01019--007 **190.00

7 11 ED 20 MOV 24 PM 3: 11

DEC () 7 2020

COVER LETTER

TO:	New Filing S Division of C					
SHRI	FCT. ELITRA	NSPORTATION LLC				
. 1 (1 1 2 .)		(Name of Res	ultin	g Florida Limi	ted Con	npany)
						d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	e return all corr	espondence concerning	g thi	s matter to:		
HERM	HLO NUNEZ					
		(Contact Person)	_		_	
ELITE	RANSPORTATIO	ON LLC				
		(Firm/Company)		1	_	
5662 1	KALOGRIDIS RE					
	·	(Address)	_		_	
HAINE	ES CITY, FL 338	44				
	((City, State and Zip Code)			-	
ELITR	ANSPORT95@	GMAIL.COM				
E-r	nail Address: (to b	e used for future annual re	porti	notifications)	_	
For fo	irther informati	on concerning this ma	tter,	please call:		
HERM	IILO NUNEZ		31	, 860	₁ 841-6	5335
	(Name of Conta	ect Person)	_"'	(Area Code) (Day	6335 -time Telephone Number)
		for the following amou a bank located in the			process	sed by this office must be payable in US
(\$25 fo & \$125	0.00 Filing Fees or Conversion 5 for Articles unization)	□\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing d Certified Co		\$185,00 Filing Fees. Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632	ection Corporations 27			New I Divisi The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810
	Tallahassee, l	r L 32314			2410	in, informor street, suite 810

Tallahassee, FL 32303

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.

istatutes.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: ELI TRANSPORTATION LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(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)
on 04/01/2017
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ELI TRANSPORTATION 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.
20 NOV 2

Signed this 11TH day of NOVEMBER	_20 _20			
Signature of Authorized Representative of Limi	ted Liability Company:			
Signature of Authorized Representative: He Printed Name: HERMILO NUNEZ		-		
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)			
Signature: Hermilo Mun Printed Name: HERMILO NUNEZ	ez	_		
Printed Name: HERMILO NUNEZ	Title: MANAGER	-		
Signature:Printed Name:	Title:	- -		
Signature:Printed Name:	Title:	-		
Signature:Printed Name:	Title:	-		
Signature:Printed Name:	Title:	- -		
Signature:Printed Name:	Title:	-		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.				
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:			
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:		20 NO	
All others: Signature of an authorized person.		ASSEE.	NO7 24 PH	
<u>Fees:</u>			H 3: 2	Ü
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)).	<u> </u>	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - N			
The name of the	Limited Liability Compan	ıy is:	
511 TO 1110 DO DT	4 7 1001110		
ELI TRANSPORTA	ATION LLC Must contain the words "Limited L	i-Little Community of the Community	*
(1	Must contain the words. Limited t.	naomiy Company, 12.12.C.,	or race.
ARTICLE II - A	Address:		
The mailing addr	ress and street address of the	he principal office of	the Limited Liability Company is:
Principal Office	Address:	Mailing Addr	r <u>ess:</u>
5662 KALOGRIDI	S RD	5662 KALOGR	IDIS RD
HAINES CITY, FL	33844	HAINES CITY,	FL 33844
The name and the	HERMILO NUNEZ 5662 KALOGRIDIS RD Florida street address	Name (P.O. Box <u>NOT</u> acce	eptable)
	HAINES CITY	FL ³³⁸⁴⁴	
	City	Zi	p
liability con registered ager statutes relati	npany at the place designal nt and agree to act in this c ing to the proper and comp	ted in this certificate, is apacity. I further agriblete performance of nas registered agent as	of process for the above stated limited I hereby accept the appointment as see to comply with the provisions of all my duties, and I am familiar with and provided for in Chapter 605, F.S

(CONTINUED)

20 NOV 24 PH 3: 21

	D	1	T	C	1	Æ	1	V
73	11	L		•	1.		L	* -

HERMILO NUNEZ

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 MGR	HERMILO NUNEZ 5662 KALOGRIDIS RD HAINES CITY, FL 33844	
		-
		973 N
		20 NOV 2
(Use attachment if necessary)		2 P
TCLE V: Other provisions, if any.		: 21
REQUIRED SIGNATURE:		
Her	milo Muñez	

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)