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COVER LETTER

Division of Corporations	
SUBJECT: Gailuli Transport (Name of Resulting Florida Lin	LC
(Name of Resulting Florida Lin	nited Company)
The enclosed Articles of Conversion, Articles of Organiza Business Entity" into a "Florida Limited Liability Compa	
Please return all correspondence concerning this matter to	:
Over of Galuci Transpo (Address) Over Stes A. Espinosa Cruz (Contact Person) (Firm/Company) (Address)	- of lic
1045 Brenton Leap Dr	2021
Ruskin FL 33570 (City. State and Zip Code) Yailucitransport (a hotmail. Com VE-mail Address: (to be used for future annual report notifications)	
(City, State and Zip Code)	— : : : : : : : : : : : : : : : : : : :
Yailucitransport (à hotmail.com	
VE-mail Address: (to be used for future annual report notifications)	
For further information concerning this matter, please call	
(Name of Contact Person) at (502)	708-0538
(Name of Contact Person) (Area Coc	le) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks dollars and drawn on a bank located in the United States)	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 and Certified C	opy Certified Copy, and Certificate of Status
Mailing Address:	Street Address:
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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 (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of Kenkucky. (Enter state, or if a non-U.S. entity, the name of the country)
on O9 09 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: Jailuai Transport (CC)
(Enter Name of Fforida 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.
2021

Signed this 26 day of January	20_21		
Signature of Authorized Representative of Limi	ted Liability Company:		
Signature of Authorized Representative: Printed Name: Ous es A. Espinosa Cruz	Title: owner		
Signature(s) on behalf of Other Business Entity:			
Signature: 197. Printed Name (Veses f).	Title: OWner		
Signature:Printed Name:	Title:		
Signature:Printed Name:			
Signature:Printed Name:			
Signature:Printed Name:			
Signature:Printed Name:	Title:		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, 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 <u>ALL</u> General Partners.	ty Limited Partnership:		
All others: Signature of an authorized person.		2121	
Fees:		F.1	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	AN 10: 13	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited Liability Company is:	
Gaille Transport 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 of	ffice of the Limited Liability Company is:
Principal Office Address: Mailir	g Address: /
1045 Brenton leaf Dr 118 Buskin FL 33570 Riv	15 Brenford Crest Dr.
Ruskin FL 33570 Riv	erview FL 33579
ARTICLE HI - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own Registered Agent business entity with an active Florida registration.)	& Registered Agent's Signature: You must designate an individual or another
The name and the Florida street address of the registered	agent are:
Onestes A. Espinosa	Cruz.
Name	
1045 Brenton Ceaf Florida street address (P.O. Box No.	Dr
Florida street address (P.O. Box No.	DT acceptable)
Rushin FL	33570 Zip
Ruskin FL City	Zip
Having been named as registered agent and to accept so liability company at the place designated in this cert registered agent and agree to act in this capacity. I fur statutes relating to the proper and complete performa accept the obligations of my position as registered and complete performance of the obligations of my position as registered agent's Signature (R	ificate, I hereby accept the appointment as ther agree to comply with the provisions of all nee of my duties, and I am familiar with and agent as provided for in Chapter 605, F.S.,
' & '	1
(CONTINUED)	7.7
	1

ARTICLE IV-

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

	Name and Address:	<u>Title:</u> "AMBR" = Authorized Member
<u>u)</u>	Onestes A. Espinosa Cru 1045 Brenton Leaf Dr. C Ruskin Fl. 33570	"MGR" = Manager MGR.
		
2621 FEE		
i.		(Use attachment if necessary)
- <u> </u>	· -	CLE V: Other provisions, if any.
		
		REQUIRED SIGNATURE:
_	authorized representative of a member	Signature of a member or

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.

Nestes. A. Espinosa Uruz

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)