# 121000233677

(Decument of Marie)
(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
- Crossia meneration is a ming amount
-

Office Use Only



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#### **COVER LETTER**

TO: New Filing Section Division of Corporations		
SUBJECT: ROGER TAX EXPRESS LLC		
(Name of Re	sulting Florida Limited Con	npany)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L	_	
Please return all correspondence concernir	g this matter to:	
ROGER CARMONA		
(Contact Person)		
(Firm/Company) 3146 W 68TH PL		7:21 fr 3
(Address)		;
HIALEAH FL 33018		<u>.</u> သ
(City, State and Zip Code) rodtax@aol.com  E-mail Address: (to be used for future annual re	eport notifications)	
For further information concerning this ma	tter, please call:	
ROGER CARMONA	at (305 )8283	070
(Name of Contact Person)	_ `	rtime Telephone Number)
Enclosed is a check for the following amodollars and drawn on a bank located in the	•	sed 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 Fees 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	New Divis The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 hassee, FL 32303



13 A. 30,

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:  ROGER TAX EXPRESS CORP
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a CORPORATION Po50000 22390
(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)
02/11/2005 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  ROGER TAX EXPRESS 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 4 day of APRIL	202/
Signature of Authorized Representative of Lim	
Signature of Authorized Representative:  Printed Name: ROGER CARMONA	193
Printed Name: ROGER CARMONA	Title: MGR
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
	?)
Signature:	
Printed Name: ROGER CARMONA	Title: PRESIDENT
Signature:	
Printed Name:	Title:
0' .	
Signature:	ele, 1
Printed Name:	little:
Signature	
Signature:Printed Name:	Title
Trined Name.	True
Signature:	
Printed Name:	Title
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida I fortand Dentary and the second second	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
organizate of an audiorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
January of Dining.	φυίου (Optionar)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

	PRESS LLC st contain the words "Limited	Liability Company, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - Ad The mailing addres		the principal office of the Limited I	Liability Company is
Principal Office A	ddress:	Mailing Address:	
3146 W 68TH PL		3146 W 68TH PL	
HIALEAH FL 33018		HIALEAH FL 33018	<del></del>
(The Limited Liability Co business entity with an a	ompany cannot serve as its owr otive Florida registration.) Florida street address of ROGER CARMONA	stered Office, & Registered Agent Registered Agent. You must designate an indi f the registered agent are:  Name	e's Signature: ividual or another 3
	3146 W 68TH PL		 O
	Florida street address	(P.O. Box NOT acceptable)	
	HIALEAH		
	City	Zip	
liability compo registered agent a	iny at the place designa ind agree to act in this c	and to accept service of process for t ted in this certificate, I hereby accep capacity. I further agree to comply w plete performance of my duties, and t	of the appointment as with the provisions of a

(CONTINUED)

Registered Agent's Signature (REQUIRED)

#### **ARTICLE IV-**

Company of the Company of

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 MGR	ROGER CARMONA	
WGI(	3146 W 68TH PL	
	HIALEAH FL 33018	
	THALLANT C 000 TO	
AMBR	MARLENE CARMONA	
	3146 W 68TH PL	
	HIALEAH FL 33018	
(Use attachment if necessary)		
LEW OA		
LE V: Other provisions, if any.		
REQUIRED SIGNATURE:		
NOOTHED STOTATORE.		
	7	
Signature of a member or	an authorized representative of a member	
This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes, I am aware	
<ul> <li>any false information submitted in a docu</li> </ul>	iment to the Department of State constitutes a third degree fe	
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)