12100036662

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Ĉit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	-
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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06/04/21--01023--020 **180.00

2021 JUNE 23 AM 10: 2



June 16, 2021

DAVID J. LAWSON JR. 7461 ESTER RD. COCOA, FL 32927

SUBJECT: TROPICAL TRANSPORTATION LLC

Ref. Number: W21000087773

We have received your document for TROPICAL TRANSPORTATION LLC and your check(s) totaling \$180.00. However, the document has not been filed and is being retained in this office for the following:

The incorrect form was submitted to our office.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Jessica A Fason Regulatory Specialist II

Letter Number: 021A00013473

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COVER LETTER

TO: New Filing Section Division of Corporati	ons			
SUBJECT: Tropical Transpo				
SUBJECT:	(Name of Resultin	g Florida Limit	ed Company)	
The enclosed Articles of Cor Business Entity" into a "Flor	iversion, Articles c ida Limited Liabil	of Organizationity Company	on, and fees are sub	omitted to convert an "Other th s. 605.1045, F.S.
Please return all corresponde	nce concerning thi	s matter to:		
David J Lawson Jr				
(Conta	ict Person)	-		
Tropical Transportation LLC				
(Firny	Company)			
7461 Ester Rd.	,			
(A	ddress)			
Cocoa, Florida 32927				
	and Zip Code)			
dlawsonjr@gmail.com	and zip code)			
E-mail Address: (to be used for	future annual report i	notifications)		
	•	•		
For further information conce	erning this matter,	piease caii:		
David J Lawson Jr	at	(419	887-1560	
(Name of Contact Person)		(Daytime Telephone	Number)
Enclosed is a check for the fordollars and drawn on a bank	ollowing amount: (located in the Unit	All checks preed States)	rocessed by this of	ice must be payable in US
	-	\$180.00 Filing I Certified Copy		y, and
Mailing Address:		!	Street Address:	
New Filing Section		_	New Filing Section	
Division of Corporati	ons		Division of Corpora	
P.O. Box 6327		-	The Centre of Talla	ihassee

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 Tropical Transportation LLC	of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Single Member LLC	
(Enter entity type. Example: corporation, limited partnership, general partnership, common l	aw or business trust, etc.]
First organized, formed or incorporated under the laws of	ame of the country)
3/1/2017 on	and of the country)
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Article	es of Organization:
Tropical 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 of 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 we locument's effective date on the Department of State's records.	•
5. The plan of conversion has been approved in accordance with all applicable statutes.	
5. The "Converted or Other Business Entity" has agreed to pay any members having appraisal which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	rights the amount to
	<u>.</u> -

Signed this 20th day of June	20_21
Signature of Authorized Representative	of Limited Liability Company:
Signature of Authorized Representative: 1 Printed Name: David J Lawson Jr	Dave Jawan h
Printed Name: David 3 Lawson 31	little: Owner
	Entity: See below for required signature(s)
Signature: Saul M Lause	w
Printed Name: Gail M Lawson	Title: Authorized Person
Signatura	
Printed Name:	Title:
Printed Name:	Title:
Timed (value)	Truc.
Signature:	40.1
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Direct	ctor, or Officer.
If Directors or Officers have not been selected	d, an Incorporator must sign.
If Florida General Partnership or Limited	Liability Partnership
Signature of one General Partner.	Established Tartifership.
If Florida Limited Partnership on Limited	Linkillan Limited D
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:
All others	
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organiza	
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Tropical Transportation	LLC	
(Must	contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address a		ncipal office of the Limited Liability Company
Principal Office Add	ress:	Mailing Address:
7461 Ester Rd.		7461 Ester Rd.
Cocoa, FL 32927		Cocoa, FL 32927
ARTICLE III - Regis The Limited Liability Conbusiness entity with an act	npany cannot serve as its own Re	Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or anoth
The Limited Liability Conbusiness entity with an act	npany cannot serve as its own Re	gistered Agent. You must designate an individual or anoth
The Limited Liability Conbusiness entity with an act	npany cannot serve as its own Re ive Florida registration.)	gistered Agent. You must designate an individual or anoth
The Limited Liability Conbusiness entity with an act	npany cannot serve as its own Reive Florida registration.) rida street address of the re David J. Lawson Jr.	gistered Agent. You must designate an individual or anoth
The Limited Liability Conbusiness entity with an act	npany cannot serve as its own Reive Florida registration.) rida street address of the re David J. Lawson Jr.	gistered Agent. You must designate an individual or anoth
The Limited Liability Conbusiness entity with an act	npany cannot serve as its own Reive Florida registration.) rida street address of the re David J. Lawson Jr. 7461 Ester Rd.	gistered Agent. You must designate an individual or anoth
The Limited Liability Conbusiness entity with an act	npany cannot serve as its own Reive Florida registration.) rida street address of the re David J. Lawson Jr. 7461 Ester Rd.	gistered Agent. You must designate an individual or anothing gistered agent are: Name

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 (REOURED)

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	David J. Lawson Jr.	
	7461 Ester Rd.	
	Cocoa, FL 32927	
MGR	Gail M. Lawson	
	7461 Ester Rd.	
	Cocoa, FL 32927	
		2021
		₹
		AH 10:
); 2-
(Use attachment if necessary)		
CLE V: Effective date, if other than the	ne date of filing: (O be specific and cannot be more than five business	PTIONAL)
fter the date of filing.)	or specific and cannot be more than five business	days prior to or 90 (
CLE VI: Other provisions, if any.		
· · · · · · · · · · · · · · · · · · ·		· .
HRED SIGNATURE: Dave	11 Tayona la	

(In accordance with section 605,0205 (3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

David J. Lawson Jr.

Typed or printed name of signee

Filing Fees: