122000130275

(Requestor's Name)
(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:

Office Use Only

T. SCOTT MAR 3 1 2022



900382664189

0-711703--01009--035 **150.00



COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: NEK Truck Dispatch LUC (Name of Resulting Florida Limited Company)	
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Ot Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.	her
Please return all correspondence concerning this matter to:	
Diana Abreu	
Direct Permits & More (Firm/Company)	
16350 Sw 112 ave	
Miami Fl 33157	
Miami Fl 33157 divect billing of Ogmail E-mail Address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
Diana Abreu at (786) 325-4407 (Name of Contact Person) (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount: (All checks processed by this office must be payable in U dollars and drawn on a bank located in the United States)	S
\$150.00 Filing Fees (\$25 for Conversion & S125 for Articles of Organization) \$\begin{array}{cccccccccccccccccccccccccccccccccccc	
Made a All	

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

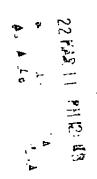
Florida Limited Liability Company

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: NEK MCK DISPATCH 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.)
First organized, formed or incorporated under the laws of Flori da (Enter state or if a non-II's entity, the name of the country)
(Citter state, or if a non-old, the name of the country)
on $\frac{1/27/2022}{\text{(date of organization, formation or incorporation)}}$
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
N&K Trick Dispatch LCC.
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: $\frac{3/2/2022}{}$. The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
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 2 nd day of March	20_22
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: Printed Name: Ne Cta US Ortega Reyes	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: X Ois Printed Name Necta LIS Ortega Reyes	Title: AMBR
Signature: X COUP Printed Name: Edvardo F Mora les	Title:Mg Y
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 If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ity Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty 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

ARTICLE I - Name:

The name of the Limited Liability Company is:

N& K Trick Dispatch LC
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is
Principal Office Address: Mailing Address:
963 Florida Parkway 963 Florida Parkway Kissimmee, FL 34743 Kissimmee, Fl 34743
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:
Necta Lis Ortega Reyes
10762 SW 55+ #1
Florida street address (P.O. Box NOT acceptable)
Miami FL 33174 City Zip
City Zip
Having been named as registered agent and to accept service of process for the above stated limit liability company at the place designated in this certificate, I hereby accept the appointment as

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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..

MGR" = Manager Necta Lis Ortega K 10762 SW 5 St # 1 Miami Fl 33/74 Edvardo F. Morales 963 Florida Parkwa Kissimmec, Fl 3474 (Use attachment if necessary) LE V: Other provisions, if any.	0.43.400000 4 1 1 13.4 1	Name and Address:
AMBR Necta Lis Ortega K 10762 Scw 5 St # 1 Miami Fl 33174 Edvardo F. Morales 963 Florida Parkwa Kissimmec, Fl 3474 We attachment if necessary) EV: Other provisions, if any. Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am awar any false information submitted in a document to the Department of State constitutes a third degree to as provided for in s.817.155. F.S. Necta Lis Ortega Reyer Typed or printed name of signee Filing Fees	"AMBR" = Authorized Member "MGR" = Manager	
Use attachment if necessary) REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am awar any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S. Necta Lis Ortega Reger Typed or printed name of signee Filing Fees		
Use attachment if necessary) REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am awar any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S. Necta Lis Ortega Reger Typed or printed name of signee Filing Fees		
Use attachment if necessary) REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am awar any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S. Necta Lis Ortega Reger Typed or printed name of signee Filing Fees		
Use attachment if necessary) REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am awar any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S. Necta Lis Ortega Reger Typed or printed name of signee Filing Fees	AMBR	Necta Lis Ortega R
Use attachment if necessary) REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am awar any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S. Necta Lis Ortega Reger Typed or printed name of signee Filing Fees		10762 SW 5 S+ #1
Use attachment if necessary) REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am awar any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S. Necta Lis Ortega Reger Typed or printed name of signee Filing Fees		
Use attachment if necessary) REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am awar any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S. Necta Lis Ortega Reger Typed or printed name of signee Filing Fees	Mar	Eduardo F. Morales
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S. Necta Lis Ortega Reyer Typed or printed name of signee Filing Fees		963 Florida Parkwa
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S. Necta Lis Ortega Regard Typed or printed name of signee Filing Fees		Kissimmer, F1 3474
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S. Necta Lis Ortega Regard Typed or printed name of signee Filing Fees		
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S. Necta Lis Ortega Regard Typed or printed name of signee Filing Fees		
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S. Necta Lis Ortega Regard Typed or printed name of signee Filing Fees		
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree as provided for in s.817.155. F.S. Necta Lis Ortega Regard Typed or printed name of signee Filing Fees	Tica attachment if pagescent)	
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree is a provided for in s.817.155. F.S. Necta Lis Ortega Reyor Typed or printed name of signee Filing Fees	Ose attachment it necessary)	
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree is a provided for in s.817.155. F.S. Necta Lis Ortega Reyor Typed or printed name of signee Filing Fees		
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree fas provided for in s.817.155. F.S. Necta Lis Ortega Regard Typed or printed name of signee Filing Fees		
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree fas provided for in s.817.155. F.S. Necta Lis Ortega Regard Typed or printed name of signee Filing Fees	LE V: Other provisions, if any.	C
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree fas provided for in s.817.155. F.S. Necta Lis Ortega Regard Typed or printed name of signee Filing Fees	LE V: Other provisions, if any.	<u>. </u>
Signature of a member or an authorized representative of a member This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree fas provided for in s.817.155. F.S. Necta Lis Ortega Regard Typed or printed name of signee Filing Fees	LE V: Other provisions, if any.	C
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree is as provided for in s.817.155. F.S. Necta Lis Ortega Reformation State Constitutes a third degree is as provided for in s.817.155. F.S. Typed or printed name of signee Filing Fees	N/"	C
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree is as provided for in s.817.155. F.S. Necta Lis Ortega Reformation State Constitutes a third degree is as provided for in s.817.155. F.S. Typed or printed name of signee Filing Fees	N P	Δ.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am award any false information submitted in a document to the Department of State constitutes a third degree is as provided for in s.817.155. F.S. Necta Lis Ortega Reformation State Constitutes a third degree is as provided for in s.817.155. F.S. Typed or printed name of signee Filing Fees	REQUIRED SIGNATURE:	<u>A</u>
any false information submitted in a document to the Department of State constitutes a third degree to as provided for in s.817.155. F.S. Necta Lis Ortega Refor Typed or printed name of signee Filing Fees	REQUIRED SIGNATURE:	A
Necta Lis Ortega Regar Typed or printed name of signee Filing Fees	REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member
Filing Fees	Signature of a member or This document is executed in accordance any false information submitted in a docu	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware
Filing Fees	Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S.	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware ament to the Department of State constitutes a third degree for
	Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155, F.S.	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree for
	Signature of a member or This document is executed in accordance any false information submitted in a docu as provided for in s.817.155. F.S.	an authorized representative of a member e with section 605.0203 (1) (b). Florida Statutes. I am aware ament to the Department of State constitutes a third degree for the section of the Department of State constitutes a constitute of the degree for the section of the section

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

ARTICLE IV-