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COVER LETTER

Division of C			
SUBJECT:	WI TRAIL	ers + Egui	present LLC
	(Name of Res	sulting Florida Limited Con	npany)
			d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please return all corr	espondence concerning	g this matter to:	
Beknap	d SHAW		
SNIT TRAI	(Contact Person)	uipment, le	•
			•
4545 Ja	60HAVE#	770626	
۰ م م	(Address)		
OCALA, FI	$\frac{34477}{\text{City. State and Zip Code}}$	<u>, </u>	
E-mail Address: (to b	neguipment (port notifications)	
For further informati	on concerning this ma	tter, please call:	
Beknard - (Name of Conta	SHAW (ct Person)	at (<u>352</u>) 4 (Area Code) (Day	197 -8965 time Telephone Number)
	or the following amou 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 Add	ress:	Street	Address:

New Filing Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

New Filing Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



RECEIVED
2022 HAY 13 PH 2: 10
2022 HAY 13 PH 2: 10
2022 HAY 13 PH 2: 10

FLORIDA DEPARTMENT OF STATE Division of Corporations

May 3, 2022

BERNARD SHAW 4545 SW 60TH AVE #770626 OCALA, FL 34477

SUBJECT: SWI TRAILERS & EQUIPMENT, LLC

Ref. Number: W22000057283

We have received your document for SWI TRAILERS & EQUIPMENT, LLC and your check(s) totaling \$150.00. However, the document has not been filed and is being retained in this office for the following:

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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: 922A00010184

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: SWITRAILERS & EQUIPMENT, INC (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <i>Corporation</i> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
on <u>07/27/202/</u> (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
SNI TRAILERS + Equipment, 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 <u>05</u> day of <u>April</u>	_ 20 <u>_ 22</u>
Signature of Authorized Representative of Limi	
Signature of Authorized Representative: Buy Printed Name: BERNARD SHAW	Title: MGR
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Byund SHAW Printed Name: BERNALO SHAW	
Printed Name: <u>BERNALO</u> SHAW	_Title: <i>PCFO</i>
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
<u>If Florida Corporation:</u>	
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	
if infectors of Officers have not been selected, an in-	corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
Signature of one General Farmer.	
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:	\$25.00 \$125.00 \$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SWI TRAILERS & Equipment, LLC
(Must contain the words "Limited Liability Company," L.L.C.," or "L.L.C.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
1220 NW 3846 AVE	4545 SW 60+11AUX
UNIT 12-13	#770626
OCA14, F1 34471	DCA14, F1 34477

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:

Bernard SHAW

Name

4545 SW 60⁴⁴ AVE

Florida street address (P.O. Box NOT acceptable)

OCA/A

City

Zip

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 (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Name and Address:
BERNARD SHAW 4545 SW GOTH AVE OCATA, FI 34477
Jama/ SHAW 4545 SW 6024 AVE OCALA, FI 34477
Matel Datiste TR 6745 ARBOR DR MIRAMOUR, F1 33023
Z HAY - S
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Burgard Al

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 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.

BERNARD SHAW

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)