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Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: CLAYE TRUCKING, LLC	
	sulting Florida Limited Company)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L	cles of Organization, and fees are submitted to convert an "Other liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concernin	ig this matter to:
CLARENCE S. COBARRIS, SR.	
(Contact Person)	·
(Firm/Company)	
2179 WILEY OAKS LANE	
(Address)	
JACKSONVILLE, FL 32210	
(City, State and Zip Code)	
clarencecobarriss@yahoo.com	
E-mail Address: (to be used for future annual re	eport notifications)
For further information concerning this ma	atter, please call:
Gina Creighton	at (407) 784-9322
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amoudollars and drawn on a bank located in the	unt: (All checks processed by this office must be payable in US United States)
S150.00 Filing Fees (\$25 for Conversion & Status S155.00 Filing Fees and Certificate of Status	S180.00 Filing Fees and Certified Copy Certificate of Status
0.g	
Mailing Address:	Street Address:
New Filing Section Division of Corporations	New Filing Section Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810
	Tallabaceae 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.

CLAYE TRUC	
(Enter Na	me of Other Business Entity)
2. The "Other Business Entity" is a	Corporation
(Enter entity type. Example: cor	poration, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated	under the laws of Florida
	(Enter state, or if a non-U.S. entity, the name of the country)
on July 13, 2021	
(date of organization, formation or incorpor	ration)
	bility Company as set forth in the attached Articles of Organization:
CLAYE TRUCKING, LLC	orida Limited Liability Company)
(Enter Name of PR	origa Limited Elaonity Company)
4. If not effective on the date of filing, of	enter the effective date: August 1, 2022
(The effective date: Cannot be prior to	o 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 document's effective date on the Department of	meet the applicable statutory filing requirements, this date will not be listed as the
5. The plan of conversion has been appr	oved in accordance with all applicable statutes.
6. The "Converted or Other Business Enti- which such members are entitled under	ity" has agreed to pay any members having appraisal rights the amount to r.ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 20 day of July	_ 2022	
Signature of Authorized Representative of Limit	ed Liability Company:	
Signature of Authorized Representative: Carrinted Name: Clarence S. Cobarris, Sr.	Title: President	
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)I
Signature: Clarence S. Cobarris, Sr.	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 Liabilit Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Gertificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	FILL TO AM 6: 2
		· ·

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N	ame:		
The name of the	Limited Liability Compar	ny is:	
	CLAYE TRUCKING, L.L.C. Must contain the words "Limited 1	Liability Company, "L.L.C.," or "LLC.	
,,		• •	
ARTICLE II - A The mailing addr		the principal office of the Lin	nited Liability Company is:
Principal Office	Address:	Mailing Address:	
1170 WH ESCALE	CLANE	2179 WILEY OAKS LA	NE
JACKSONVILLE		JACKSONVILLE, FL 32	2210
-	e Florida street address of	-	
	Clarence S. Cobarris, S	Name	-
		Nattic	
	2179 Wiley Oaks Lane		_
	Florida street address	(P.O. Box <u>NOT</u> acceptable)	
	Jacksonville	32210 FL	
	City	Zip	-
liability con registered ager statutes relati	npany at the place designant and agree to act in this in the ing to the proper and comp	and to accept service of proce ned in this certificate, I hereby capacity. I further agree to co plete performance of my dutie, as registered agent as provide	eaccept the appointment as imply with the provisions of all s, and I am familiar with and
	Clan C	s Signature (REQUIRED)	
	Registered Agent'	s Signature (REQUIRED)	© <u>~</u>
			2022 AUG
	(COI	NTINUED)	스타 6

	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager A M 12 12	Clarence S. Cobarris, Sr.
	2179 Wiley Oaks Lane
	Jacksonville, FL 32210
······································	
-	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
	- 3
REQUIRED SIGNATURE:	- Br
Claren Colore	
Signature of a member or	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, I am aware that
Signature of a member or	
Signature of a member or This document is executed in accordance any false information submitted in a doct	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware that
Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155. F.S. Clarence S. Cobarris, Sr.	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware that ament to the Department of State constitutes a third degree felony upped or printed name of signee
Signature of a member or This document is executed in accordance any false information submitted in a doct as provided for in s.817.155. F.S. Clarence S. Cobarris, Sr.	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes, I am aware that ament to the Department of State constitutes a third degree felony