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(Re	questor's Name	e)
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Certified Copies	_ Certificate	es of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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22 TEC -1 PH 4: 39

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COVER LETTER

TO: New Filing Division o	g Section f Corporations		
SUBJECT: INTE	R CITY DISPOSAL, LLC		
SODJECT.	(Name of Re	sulting Florida Limited	d Company)
The enclosed Arti Business Entity" i	cles of Conversion, Artic nto a "Florida Limited L	cles of Organization iability Company"	n, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all c	orrespondence concernir	ng this matter to:	
Tanya Garcia Vega			
	(Contact Person)		
Jonathan H. Green &	Associates P.A.		
	(Firm/Company)		
901 Ponce De Leon	Blvd. Suite 601		
	(Address)		
	(City, State and Zip Code)	· · · · · · · · · · · · · · · · · · ·	
Coral Gables, Florid	a 33134		
E-mail Address:	(to be used for future annual r	eport notifications)	
For further inform	nation concerning this ma	atter, please call:	
Tanya Garcia Vega		at (³⁰⁵)	372-5100
(Name of C	Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a che dollars and drawn	ck for the following amo	unt: (All checks pr United States)	rocessed by this office must be payable in US
\$150.00 Filing For (\$25 for Conversion & \$125 for Articles of Organization)	ees	□\$180.00 Filing I and Certified Copy	· ·
STREET ADDR New Filing Section Division of Corp Clifton Building 2661 Executive Contact Tallahassee, FL	on orations Center Circle	New Fil Division P. O. Bo	ING ADDRESS: ling Section n of Corporations ox 6327 ssee, FL 32314

`	FLORIDA CAPITAL, COURIER SERVICES, 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-624	INC
	Please use funds from this account: 12021 Authorization Signature: Inter City Disposal LLC Business	
	Walk in Pick up time	
	Mail out	Will wait
	Photocopy	
	X Certified Copy of Articles of Incorpora _X_ Certificate of Status NEW FILINGSProfitNot for Profit _ Limited LiabilityDomesticationLLLPCORP	AMMENDMENTS AmendmentResignation of R.A. Officer/DirectorChange of Registered AgentDissolution/MergerXConversionAFFIDAVID BY FOREIGN CORP
	OTHER FILINGS	REGISTERATION/QUALIFICATIONS
	Annual Report	Foreign filing
	Fictitious Name	Statement of AUTHORITYReinstatement
_	APOSTIL	
EXAMI	NER'S INITIALS:	



November 30, 2022

FLORIDA CAPITAL COURIER SERVICES, INC.

SUBJECT: INTER CITY DISPOSAL, LLC

Ref. Number: W22000146886

We have received your document for INTER CITY DISPOSAL, LLC. However, the document has not been filed and is being returned for the following:

The Articles of Conversion must have the converting entity reflect the name active in our records as well as have the date the company was firstformed and organized which would be Inter City Disposal Corp. and was filed and organized in September 29th, 1999.,

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham Regulatory Specialist II New Filing Section

Letter Number: 622A00026424



Articles of Conversion For "Other Business Entity" Into

20EC -1 FH W 35

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization 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: INTER CITY DISPOSAL COYO.
INTER CITY DISPOSAL (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.)
(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)
on 9-29-1999 (date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: INTER CITY DISPOSAL, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 11/30/2022 (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 20 day of November	20_22
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative: Printed Name: RAMON MIJARES	Title: CEO
Signature(s) on behalf of Other Business Entity:	
7.1//	
Signature: Printed Name AND MIJARES	Tid. Chief Beautive Officer
Printed Name ANGON MIJARES	1 ifie: Chief Executive Offices
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title
Printed Name:	
Signature:	
Printed Name:	Title:
a.	
Signature:Printed Name:	Title:
Franca Name.	
Signature:Printed Name:	
Printed Name:	_ Title:
Tempeda Compositions	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fces:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

DEC-1 PH 1: 30

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

INTER CITY DISPOSAL, LLC (Must contain the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:	of the principal office of the Limited Liability Company	is:
Principal Office Address:	Mailing Address:	
3355 NW 41 STREET	3355 NW 41 STREET	
MIAMI, FL 33142	MIAMI, FL 33142	
		っ
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address BERNARDO MIJARE		SEUBLIGE VIEWS
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address	own Registered Agent. You must designate an individual or another of the registered agent are:	SECTION OF THE STATE OF THE STA
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address BERNARDO MIJARE 3355 NW 41 STREET	s of the registered agent are: Name	SECENT OF STATE
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address BERNARDO MIJARE 3355 NW 41 STREET	s of the registered agent are:	Student of the State of State
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address BERNARDO MIJARE 3355 NW 41 STREET	s of the registered agent are: Name	ministra in the second of the

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)

Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager RAMON MIJARES AMBR 3355 NW 41 STREET MIAMI, FL 33142 (Use attachment if necessary) ARTICLE V: Other provisions, if any. 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 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, I'.S. RAMON MIJARES Typed or printed name of signee Filing Fees \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 5.00 Certificate of Status (Optional) \$ 30.00 Certified Copy (Optional)

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

ARTICLE IV-