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(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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23 APR -3 AM 3: 12 SECRETARY OF STAIR TALLAHASSEE "TIPERS.

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COVER LETTER

TO:	New Filing Se Division of C							
SHRI	IECT: MILLY TI	RUCKING INC						
SOD			ulting Florida Lim	ited Com	ipany)			
		s of Conversion, Artic a "Florida Limited Li						ther
Please	e return all corre	espondence concerning	g this matter to:					
DEL F	RIO PERAZA, ISF	RAEL S						
		(Contact Person)						
MILLY	TRUCKING INC							
		(Firm/Company)		_				
4718	MICHAEL CT Un	it 114						
		(Address)		_				
TAME	PA, FL 33614							
	(0	City, State and Zip Code)		-		SE 38	23 APR -3	
prosc	opio44@yahoo.c	om				LAE AE	ΛPI	77
E-1	nail Address: (to b	e used for future annual re	port notifications)	_		15.5 17.5 17.7	~	[
For fi	urther informati	on concerning this ma	tter, please call:			SEE.	A A	
ISRA	EL S. DEL RIO P	ERAZA	_at (<u>813</u>	5266		100	بب	
	(Name of Conta	et Person)	(Area Code	(Day	time Telephone Number)	— 高元	12	
		or the following amou a bank located in the		process	ed by this office must	t be payat	ole in U	US
(\$25 fc & \$12	50.00 Filing Fees or Conversion 5 for Articles anization)	S155.00 Filing Fees and Certificate of Status	S180.00 Filin and Certified Co		☐\$185.00 Fiting Fees, Certified Copy, and Certificate of Status			
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New I Divisi The C 2415	Address: Filing Section fon of Corporations Centre of Tallahassee N. Monroe Street, Suitassee, FL 32303	ite 810		

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: MILLY TRUCKING INC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a [INC] (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
04/04/2016 on .
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
MILLY TRUCKING LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 03/27/2023. (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.

Signature of an authorized person.

Fees:

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

Certified Copy:

\$30.00 (Optional)

Certificate of Status:

\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the	ame: Limited Liability Con	npany is:	
MILLY TRUCKING		ited Liability Company, "L.L.C.," or "L.L.C.,")	
(,	viust contain the words. Limi	tied Liability Company, L.L.C., or 1.CC.	
ARTICLE II - A The mailing addr		of the principal office of the Limite	d Liability Company is:
Principal Office	Address:	Mailing Address:	
4718 MICHAEL C	T Unit 114	4718 MICHAEL CT Unit 11	4
TAMPA, FL 33614		TAMPA, FL 33614	
			
ARTICLE III - (The Limited Liability business entity with a The name and the	individual or another 23 APR -3 AM SECRLIABY OF ALLAHASSEE, 11		
		Name	
	4718 MICHAEL CT U		
	Florida street address (P.O. Box NOT acceptable)		3: - 10:21
	TAMPA	FL ³³⁶¹⁴	2
	City	Zip	
liability con registered ager statutes relati	npany at the place desing and agree to act in the proper and coolingations of my posit.	ent and to accept service of process fignated in this certificate, I hereby achis capacity. I further agree to compomplete performance of my duties, a ion as registered agent as provided for the Signature (REQUIRED)	cept the appointment as ly with the provisions of all nd I am familiar with and

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager AMBR	DEL RIO PERAZA, ISRAEL S	
	4718 MICHAEL CT Unit 114	
	TAMPA, FL 33614	
		<u></u>
		-
(Use attachment if necessary)		
`		7
		23 SEC
CLE V: Other provisions, if any.		APR CRETA
		ASS 人
		<u> </u>
REQUIRED SIGNATURE:/		- ့ ၁ - ့ ယ
		51. 71.
		10

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.

ISRAEL S DEL RIO PERAZA

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)