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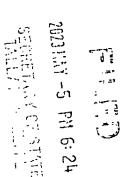
| (Requestor's Name) |
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| (only ordinally) |
| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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W23000065953





May 5, 2023

ZACHARS MITCHELL FREIGHT GAINER LLC 3082 LANDMARK BLVD APT 1703 PALM HARBOR, FL 34684 US

SUBJECT: FREIGHT GAINER LLC Ref. Number: W23000065953

We have received your document for FREIGHT GAINER LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Section 607.0120(4), 617.01201, or 605.0206, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

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.

Dil Sultana Regulatory Specialist II

Letter Number: 823A00010205

2823 HAY -5 PM 6: 24

| | | COVER LETTE | .R | | |
|--|--|---|--|------------------------|----------------------|
| TO: New Filing S Division of C | | | | | |
| SUBJECT: | Frankt (Nume of Res | Sulting Florida Limited Co | ompany) | | |
| The enclosed Article Business Entity" inte | s of Conversion, Artic o a "Florida Limited Li | les of Organization, a | and fees are submitted to co accordance with s. 605.104 | invertan "U 15, F.S | ther |
| Please return all con- | espondence concernin | g this matter to: | | | |
| 3082 La | (Contact Person) (Firm Company) (Address) | COCT HA | | | |
| P-100 F14 | City, State and Zip Code) | [9],/ | | | |
| F-mail Address; (10 h | できた。 / c マベン・C コート por learning for future annual reg | port notifications) | | | |
| | on concerning this mat | | | | |
| Z-d-12 | Midstery | at (<u>777</u>) <u>7</u> | 29-4476 Oytime Telephone Number) | | |
| | | | | | |
| | or the following amou a bank located in the I | | ssed by this office must be | payable in U | ĽS |
| \$150,00 Filing Lees (\$25 for Conversion & \$175 for Articles of Organization) | DS155 00 Eding Fees and Certificate of Status | □\$180 60 Filing Fees and Certified Copy | ☐\$185.00 Fitting Fees, Certified Copy, and Certificate of Status | | |
| Mailing Addr New Filing Sc Division of Co P.O. Box 632 Tallahassee, F | ection orporations 7 | New Divi The 2415 | et Address: Filing Section sion of Corporations Centre of Tallahassee S.N. Monroe Street, Suite 8 ahassee, FL 32303 | SECREMARY OF STATE | 2623 KAY -5 PM 6: 24 |

Articles of Conversion

For

"Other Business Entity"

Into

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 8,605,1045. Horida Statutes.

| (Enter Name of Other Business Entity) | |
|---|----------------------------|
| 2. The "Other Business Entity" is a | law or business trost etc. |
| First organized, formed or incorporated under the laws of | ame of the country |
| on 7/25/2022 (date of organization, furmation or incorporation) | |
| (date of organization, formation or incorporation) | |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Article | es of Organization; |
| (Enter Name of Florida Limited Liability Company) | |
| (Enter Name of Florida Limited Liability Company) | |
| 4. If not effective on the date of filing, enter the effective date: 7/25/2012 | |
| (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 willocument's effective date on the Department of State's records. | vill not be listed as the |
| 5. The plan of conversion has been approved in accordance with all applicable statutes. | |
| The "Converted or Other Business Entity" has agreed to pay any members having appraisal which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S. | rights the amount to |
| | |

| Signed this 6 day of Februar | 20.13 | |
|---|-------------------------|--|
| Signature of Authorized Representative of Lin | | |
| Signature of Authorized Representative: Printed Name: 2-check Mitch | | |
| Signature(s) on behalf of Other Business Entity: | | |
| Signature: Mill | - 1 organitation | 71 |
| Signature: 2-change. Mitchell Printed Name: 2-change. Nitchell | Title: CEO | |
| | | |
| Signature:Printed Name: | Title: | |
| | | |
| Signature:Printed Name: | Tisto | . |
| 0. | Title: | |
| Signature:Printed Name: | | |
| | | |
| Signature: | | |
| Signature:Printed Name: | Title: | |
| Signature: | | |
| Printed Name: | Title: | |
| If Florida Corporation: | | |
| Signature of Chairman, Vice Chairman, Director, or | Officer. | |
| If Directors or Officers have not been selected, an In | corporator must sign. | |
| If Florida General Partnership or Limited Liabili | ty Partnership | |
| Signature of one General Partner. | <u> </u> | |
| If Florida Limited Partnership or Limited Liabili | ty Limited Doutson-king | |
| Signatures of ALL General Partners. | cy Dimited Fartnersnip: | |
| All others: | | |
| Signature of an authorized person. | | |
| <u>ees:</u> | | |
| <u>. 565.</u> | | |
| Articles of Conversion: | \$25.00 | (C >>) |
| Fees for Florida Articles of Organization: | \$125.00 | 823 Factor |
| Certified Copy: Certificate of Status: | \$30.00 (Optional) | E SECUE OF THE PROPERTY OF THE |
| | \$5.00 (Optional) | 5 |
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| | | F. 24 |
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

Mailing Address:

ARTICLE I - Name:

ARTICLE II - Address:

Principal Office Address:

The name of the Limited Liability Company is:

| Box Landmert Blus Alt 1701 Poin Horber FL | JURE Landon Color Blue Ali 1703 Pala Harbar El 34684 | |
|--|---|--|
| ARTICLE III - Registered Agent, Register (The Limitea Liability Company cannot serve as its own Registances entity with an active Florida registration.) | red Office, & Registered Agent's Signatu gistered Agent. You must designate an individual or anoth | re: her |
| The name and the Florida street address of the | e registered agent are: M. A.L. | |
| 子の名と しゅん Florida street address (P. | .O. Box NOT acceptable) | |
| Polo Hach | Zip | |
| registered agent and agree to act in this cape statutes relating to the proper and complete | I in this certificate. I hereby accept the appoi | intment as svisions of all ar with and |
| Hegistered Apent's Si | gnature (REQUIRFD) | |
| (CONT) | NUED) | 2023 HAY -5 |
| | | 13 D PN 6: 24 |

| <u>Title:</u> "AMBR" = Authorized Member | Name and Address: |
|---|---|
| "MGR" = Manager | 7 1 |
| MGK | Locher M. John |
| | 1012 Leadont Blad All |
| | 1.00 (1.818) |
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| LE V: Other provisions, if any. | |
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| LE V: Other provisions, if any. REQUIRED SIGNATURE: | hild |
| LE V: Other provisions, if any. | michell |
| REQUIRED SIGNATURE: | an authorized representative of a member |
| REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance | an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes Tamaware (|
| REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance | |
| REQUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document provided for in 8.817,155.1-8 | an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes I amaware ment to the Department of State constitutes a third degree fel |
| Signature of a member or This document is executed in a document as provided for in 8.817.155.4.8 | an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes I am aware ment to the Department of State constitutes a third degree fe |
| REOUIRED SIGNATURE: Signature of a member or This document is executed in accordance any false information submitted in a document provided for in 8.817.155.4 S | an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes I amaware ment to the Department of State constitutes a third degree fe |
| Signature of a member or This document is executed in accordance any false information submitted in a document provided for in \$817.155. F.S. | an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes I am aware ment to the Department of State constitutes a third degree fe |

ARTICLE IV-