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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Danco Logistics Conversion (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Corneliu Colesiac (Contact Person) Danco Logistics LLC (Firm Company)
Danco Logistics LLC (FirmCompany)
12437 Camborne ct (Address)
City, State and Zip Code)
E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person) (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)
\$\begin{align*} \begin{align*} \begi
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303

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 s.605.1045, Florida Statutes.

Statutes.		
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of	Conversion	n is:
(Enter Name of Other Business Entity)		
2. The "Other Business Entity" is a UC (Enter entity type. Example: corporation, limited partnership, general partnership, common law		
First organized, formed or incorporated under the laws of Virginia (Enter state, orlifa non-U.S. entity, the name	e of the count	_ ry)
on $\frac{08/17/2022}{\text{(date of organization, formation or incorporation)}}$		
3. The name of the Florida Limited Liability Company as set forth in the attached Articles	of Organiz	zation:
(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 cal 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 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 ri which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	ghts the am	ount to
	2023 JUN 12 SECRETARY TALLATOR	e e

Signed this 12 day of june 20 23
Signature of Authorized Representative of Limited Liability Company:
Signature of Authorized Representative: Printed Name: Coneliu Clesic Title: Project
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Printed Name:Corneliu Colesnic Title:
Signature: Printed Name:Title:
Signature: Title:
Signature: Title:
Signature: Title:
Signature: Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.
All others: Signature of an authorized person.
Fees:

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Articles of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization:

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	5:			
Koor Logistics	Lic	EIN: 8	38-37	5243
(Must contain the words "Limited Liabit	ity Company, "L.	L.C., or LEC.)		
ARTICLE II - Address: The mailing address and street address of the particle o	orincipal offic	e of the Limited	Liability Co	ompany is:
Principal Office Address:	Mailing A	Address:		
9101 Lakeridge Blud #22	9101 Lak	eridae Blad i	#22	
Boca Roton, Ft, 33496	Boca Ro	eridge Blud,	6	
				
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	ed Office, & I	Registered Agen a must designate an inc	t's Signatu lividual or anotl	re: her
The name and the Florida street address of the	registered ag	ent are:		
Cocaeliu	Colesnic			
Nan	ne			
Nan 9101 Lakeridge k Florida street address (P.	olud,#22	Boo Poton	.FL, 33 Y	96
1 Torrida Street address (1 .				
City	FL	Zip		
•				
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this cape statutes relating to the proper and complete accept the obligations of my position as r	in this certific acity. I furthe e performan et	ate, I hereby acce r agree to comply of my duties, and	ept the appoi with the pro U am famili	intment as ovisions of al iar with and
	M/_	-		
Registered Agent's	Mature (REC	UIRED)	NI 3038	2023 JUN
(CONTI	NUED)		ETWY CISTAL	UH 12 PN 1:34
			f.r.	Ŧ

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	O . OI
WOK - Wallager	Corneliu Colesnic
	9101 Lateridge Blud 22, Boca Raton, FL,
CLE V: Other provisions, if any.	
	1/1
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
Signature of a member This document is executed in accord any false information submitted in a co	or an authorized representative of a member ance with section 605.0203 (1) (b), Florida Statutes. I am aware that document to the Department of State constitutes a third degree felony
Signature of a member This document is executed in accord any false information submitted in a cas provided for in s.817.155, F.S.	locument to the Department of State constitutes a third degree felony
Signature of a member This document is executed in accord any false information submitted in a cas provided for in s.817.155, F.S.	locument to the Department of State constitutes a third degree felony
Signature of a member This document is executed in accord any false information submitted in a c as provided for in s.817.155, F.S.	Typed or printed name of signee Filing Fees
Signature of a member This document is executed in accord any false information submitted in a c as provided for in s.817.155, F.S.	Typed or printed name of signee Filing Fees Les of Organization and Designation of Registered Agent

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