(Requestor's Name)	
(Address)	_
(Address)	
(133.335)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
, ,	
(Document Number)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	٦
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Office Use Only



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### **COVER LETTER**

Division of Corporations
SUBJECT: 5011 Trucking Transportation UC (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:
Jakon Lake (Contact Person)
(Firm/Company)  167 Whetherbine Way W  (Address)
Tallamssee FL 32301 (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) at (Sto) 48-20165 (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)
☐ \$150.00 Filing Fees (\$25 for Conversion & Status

**TO:** New Filing Section

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 <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:  5011 Trucking & Transportation   UC   (Enter Name of Other Business Entity)
2. The "Other Business Entity" is a <u>Corporation</u> (Enter entity type. Example: corporation, 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 119 A033 (date of organization, formation or incorporation)  3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
(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 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.

2023 JUN 16 AN 2: 10 SECRETARY OF STATE

Signed this 16 day of 19	20.23
Signature of Authorized Representative	
Signature of Authorized Representative: _ Printed Name:	Title:Mgr
Signature(s) on behalf of Other Business I	Entity: [See below for required signature(s)]
Signature:	Title:Mgr
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	Title:
	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Dire If Directors or Officers have not been selected	
If Florida General Partnership or Limited Signature of one General Partner.	<u>Liability Partnership:</u>
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00

\$125.00

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

Fees for Florida Articles of Organization:

Certified Copy: Certificate of Status: 2023 JUH 16 AM 2: 10 SECRETARY CE STATI

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
Must contain the words "Limited Liability	Ortion LLC Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company i	S:
Principal Office Address:	Mailing Address:	
167 Whether time Way N Tallarassee, FL 32301		
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another	
The name and the Florida street address of the re	gistered agent are:	
Lika Lake	· · · · · · · · · · · · · · · · · · ·	
No7 Whofkerbir Florida street address (P.O.		
<u> Talanessee</u>	FL 3230) Zip	
•	•	
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated lim this certificate, I hereby accept the appointment a ty. I further agree to comply with the provisions a terformance of my duties, and I am familiar with a istered agent as provided for in Chapter 605. F.S.	is of all ind
Registered Agent's Signa (CONTINU	SECRETAR: TALLAHA	C
(CONTINC	16 AM 2: 10 IASSEE, FL	

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Ernesto Lake 1/27 Whetherbine Way W Jallamassec Fl 52301
Mgr	Merci Lake 167 Whetherbine Way W Managessa, Fl. 37301)
(Use attachment if necessary)	
RTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	an authorized representative of a member

Typed or printed name of signee

Filing Fees

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 5.00 Certificate of Status (Optional)

NHARY OF STANCE

2 \$ 30.00 Certified Copy (Optional)