L23000548812

	(Requestor's Name)
	(Address)
	(Address)
	V. 122 722,
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
Special Instructions to	Filing Officer:

Office Use Only



400420332214

13/14/29--01003--003 **185.00

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RECEIVE

COVER LETTER

Division of C	Corporations				
SUBJECT:	MW	V TRU	ICKING, I	LLC	
(Name of Resulting Florida Limited Company)					
					a, and fees are submitted to convert an "Other in accordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this	matter to	0:	
MAURICE VANKINSO	COTT				
	(Contact Person)	-			
MWV TRUCKING, LLC	C				
	(Firm/Company)				
15024 SW 28TH TER	RACE RD				
	(Address)				
OCALA, FL. 34473					
(1	City, State and Zip Code)				
maurice@mwvtrucking	gllc,com				
E-mail Address: (to b	oe used for future annual re	port no	tifications	5)	
For further informati	on concerning this ma	tter, p	lease cal	ll:	
MAURICE VANKINSO	OTT	at (708)3(362-7873
(Name of Conta	act Person)		(Area Co	de) ((Daytime Telephone Number)
	for the following amou a bank located in the				cessed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status		180.00 Fili Certified (_	Certified Copy, and Certificate of Status
Mailing Add	ress:			St	treet Address:
New Filing S	ection			Ne	ew Filing Section
Division of Corporations				ivision of Corporations	
P.O. Box 632				1 h	he Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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TO: New Filing Section

December 13, 2023

To whom it may concern I am writing this letter to accompany my application of LLC conversion from current Illinois jurisdiction to Florida. I made a mistake and filed a duplicate LLC here in Florida on 4/13/2023 file number L23000183084. I wasn't clear on the process and since have been better educated. I dissolved the file number L23000183084 on 12/13/2023 So that the correct option of conversion of MWV TRUCKING, LLC can be formed in Florida's jurisdiction. Please release the name MWV TRUCKING LLC UNDER FILE NUMBER L23000183084. AND PROCESS THE SUBMITTED APPLICATION OF CONVERSION FOR MWV TRUCKING, LLC.

I WOULD LIKE TO KEEP THE SAME EIN NUMEBER, BANK ACCOUNTS AND SIMPLY RESUME MY BUSINESS TRANSACTIONS IN MY NEW DOMICILE AS I AM NOW A FLORIDA RESIDENT. WE NO LONGER WILL BE CONDUCTING ANY BUSINESS OUT OF ILLINOIS. I ALSO SUBMITTED A COPY OF THE ILLINOIS CERTIFICATE OF GOOD STANDING. AFTER THE CONVERSION IS COMPLETE AND LLC HAS TAKEN FORM IN FLORIDA, WE WILL INITIATE THE ILLINOIS DISSOLUTION AND UPDATE INFORMATION WITH THE IRS.

If you have any questions, I can be reached at 708-362-7873.

Thanks,

Maurice Vankinscott MWV TRUCKING,LLC

15024 ZSZW 28 TH Terrace Rd.

Ocala, FL 34473

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: MWV TRUCKING, ELC	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
(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)	
11/28/2018 on .	
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	n:
MWV TRUCKING, LLC	
(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.)	
<u>Note:</u> 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.

•	•	12
Signed t	his 13 day of DECEMBER	20 <u>4.)</u>
Signatu	re of Authorized Representative of	Limited Liability Company:
Signatur	re of Authorized Representative: 🎢 🤇	anne Vankinseo 1
Printed 1	re of Authorized Representative: Moname: MAURICE VANKINSCOTT	Title: MGR
		ity: See below for required signature(s)
Signature	e: 12 Kan Kus will	Title: MGR
Printed N	Name: WANDA VANKINSCOTT	Title: MGR
Signature	e:	
Printed N	Name:	Title:
Signatur	e:	
Printed N	Name:	Title:
C'		
Signature Drinted N	e:	Title:
rimear	vaine,	THE
Signatur	e:	
Printed N	Vame:	Title:
Signature	e:	
		Title:
	la Corporation:	0.00
_	e of Chairman, Vice Chairman, Directo	,
II Direct	ors or Officers have not been selected, a	in incorporator must sign.
If Elovid	la General Partnership or Limited Li	ability Partnership
	e of one General Partner.	ability i ai the suip.
O.Battar	o or one concrat rathlet.	
If Florid	la Limited Partnership or Limited Li	ability Limited Partnership:
	es of ALL General Partners.	
All other		
Signatur	e of an authorized person.	
Fees:		
	A. (1.1 6.C	\$35.00
	Articles of Conversion:	\$25.00 6135.00
	Fees for Florida Articles of Organization	
	Certified Copy: Certificate of Status:	\$30.00 (Optional)
·	serumente of Status.	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	MV	V TRUCKING, LLC
	Must contain the words "Lin	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - A	Address:	
The mailing addr	ress and street address	of the principal office of the Limited Liability Company is
Principal Office	Address:	Mailing Address:
15024 SW 28TH T	TERRACE RD.	15024 SW 28TH TERRACE RD.
OCALA, FL. 3447	3	OCALA. FL. 34473
OCALA, FL. 34473		
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, R Company cannot serve as it in active Florida registration	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, R Company cannot serve as it in active Florida registration e Florida street addre	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, R Company cannot serve as it in active Florida registration e Florida street addre	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are:
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, R Company cannot serve as it in active Florida registration e Florida street addre	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: CE VANKINSCOTT Name
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, R Company cannot serve as it in active Florida registration e Florida street addre MAUR 15024 SW 28TH TE	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: CE VANKINSCOTT Name
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, R Company cannot serve as it in active Florida registration e Florida street addre MAUR 15024 SW 28TH TE	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: CE VANKINSCOTT Name RRACE RD.

ted 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..

(CONTINUED)

ARTICLE IV-

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

-	<u> Fitle:</u>	Name and Address:
	'AMBR" = Authorized Member	
	'MGR" = Manager Maurice Vankinscott	15024 CW 20TH TERRACE DE
MUWN!	wadrice varkinscott	15024 SW 28TH TERRACE RD. OCALA, FL. 34473
		OCALA, FL. 34473
MGR	Wanda Vankinscott_	15024 SW 28TH TERRACE RD.
-		OCALA. FL. 34473
_	·····	
-		
(Use attachment if necessary)	
	•	
ARTICI	LE V: Other provisions, if any.	
ī	REQUIRED SIGNATURE:	
1	Manne Vante	
	Manne Voente	macott
	Signature of a member or an a	uthorized representative of a member
	This document is executed in accordance with s	section 605.0203 (1) (b), Florida Statutes, I am aware that
	any false information submitted in a document to as provided for in s.817.155, F.S.	o the Department of State constitutes a third degree felony
	as provided for in 8.617.133, r.a.	
	MAUR	ICE VANKINSCOTT
	Typed o	or printed name of signee
		Filing Fees
		ganization and Designation of Registered Agent
	\$ 30.00 Certified Copy (Optional)	\$ 5.00 Certificate of Status (Optional)

P. ...

File Number

0739942-1



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the

Department of Business Services. I certify that

MWV TRUCKING, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON NOVEMBER 28, 2018, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 13TH day of DECEMBER A.D.

Authentication #: 2334701232 verifiable until 12/13/2024

Authenticate at: https://www.ilsos.gov

2023

SECRETARY OF STATE