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PICK-UP	☐ WAIT	MAIL
	(Business Entity Name)	
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	(Document Number)	
Certified Copies	_ Certificates of S	tatus
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Special Instructions to	Filing Officer:	
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### **COVER LETTER**

то:	New Filing So Division of C				
CLID	JECT: GUVAKO	TRANS LLC			
SUBJ	ECI;	(Name of Res	sulting Florida Limit	ed Com	pany)
					d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	e return all corre	espondence concernin	g this matter to:		
VALE	RII GUMENIUK				
		(Contact Person)			
GUVA	AKO TRANS LLC				
		(Firm/Company)			
7264	56TH AVE N				
		(Address)			
ST. P	ETERSBURG, FI	L 33709			
	((	City, State and Zip Code)			
GUVA	\9691@GMAIL.C	ЮМ			
E-r	nail Address: (to b	e used for future annual re	port notifications)		
For fi	orther information	on concerning this ma	tter, please call:		
VALE	RII GUMENIUK		at ( <sup>917</sup>	86075	545
	(Name of Conta	ct Person)	(Area Code)	(Day	ime Telephone Number)
		or the following amou a bank located in the	•	rocess	ed by this office must be payable in US
(\$25 fc & \$125	50.00 Filing Fees or Conversion 5 for Articles anization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing So Division of C P.O. Box 632	ection orporations	,	New F Divisi	Address: Filing Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## **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: GUVAKO TRANS LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
04/26/2023 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:
GUVAKO TRANS 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.)
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.

Signed this 20 day of DECEMBER	20 2 3
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: VALERII GUMENIUK	This OWNER Manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Printed Name: VALERII GUMENIUK	Title: OWNER manager
Signature:Printed Name:	<b>U</b>
Signature:Printed Name:	
Signature:Printed Name:	
Signature: Printed Name:	
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In- If Florida General Partnership or Limited Liabili	corporator must sign.
Signature of one General Partner.	ty raitheramp.
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
GUVAKO TRANS LLC	
(Must contain the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7264 56TH AVE N	7264 56TH AVE N
ST. PETERSBURG, FL 33709	ST. PETERSBURG, FL 33709
VALERII GUMENIUK Name 7264 56TH AVE N	
Florida street address (P.O	
ST. PETERSBURG	FL <sup>33709</sup>
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	Zip  o accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered 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:

"AMBR" = Authorized Member	
"MGR" = Manager  M1 G R	Valerii Gumeniuk  7264 56TH AVE N  ST. Petersburg, FL 33
***	
(Use attachment if necessary)	
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CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.  REQUIRED SIGNATURE	
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. I am aware the ment to the Department of State constitutes a third degree felo
CLE V: Other provisions, if any.  REQUIRED SIGNATURE  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  VALERII GUMENIUK	with section 605.0203 (1) (b), Florida Statutes, I am aware the ment to the Department of State constitutes a third degree felo
CLE V: Other provisions, if any.  REQUIRED SIGNATURE  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  VALERII GUMENIUK	with section 605,0203 (1) (b), Florida Statutes. I am aware the