L2400020380

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
75
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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04/29/24-01805--019 ++155.00

TORETTO GESTALE.

T.JH 517/24

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Land-Sea Transport Services C	Co. LLC	ļ	
(Name of Re	sulting Florida Limit	ted Company)	
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L	iability Company		
Please return all correspondence concerning	ig this matter to.		
Lizette Z. Cueto			
(Contact Person)		-	
Land-Sea Transport Services Col LLC			
(Firm/Company)			
15818 SW 69 Lane			
(Address)		-	
(City, State and Zip Code)		_	
Miami, FL 33193			
E-mail Address: (to be used for future annual re	eport notifications)	-	
For further information concerning this ma	atter, please call:		
Lizette Cueto	at (⁷⁸⁶	543-5703	
(Name of Contact Person)		(Daytime Telephone Numbe	[]
Enclosed is a check for the following amore dollars and drawn on a bank located in the \$\Bigsup_{\text{S150.00 Filing Fees}} \Bigsup_{\text{S155.00 Filing Fees}} \Bigsup_{\text{S25 for Conversion}} \Bigsup_{\text{S125 for Articles}} \Bigsup_{\text{Status}} \Bigsup_{\te		Fees S185.00 Filing Fee	mu apr 20
or organization)			
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 Tallahasses 2415 N. Monroe Street, S Tallahassee, FL 32303	



"Other Business Entity" into a Florida Limited Liability Company in accordance was Statutes.	
1. The name of the "Other Business Entity" immediately prior to the filing of the Artic Land-Sea Transport Services Co., Inc.	les of Conversion is:
(Enter Name of Other Business Entity)	-
2. The "Other Business Entity" is a Corporation	
(Enter entity type. Example: corporation, limited partnership, general partnership, comm	on 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)
04/19/2023 on .	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Art	icles of Organization:
Land-Sea Transport Services Co. 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 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 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 appraisable which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	sal rights the amount to PR 29 AND STATE

Signed this 19 day of April	_ 20
Signature of Authorized Representative of Limit	<i>l</i>
Signature of Authorized Representative:	Title: President
Signature(s) on behalf of Other Business Entity:	
Signature:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	
Signature:	
Printed Name:	Ì
Signature:Printed Name:	Title:
Signature:Printed Name:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	Officer. corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ity Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> 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)

montape 20 AMI's 00

any is:	
d Liability Company, "L.L.C.," or "LLC.")	
f the principal office of the Limite	d Liability Company is:
Mailing Address:	
15818 SW 69th Lane	
Miami, FL 33193	
	<u> </u>
istered Office, & Registered Ago on Registered Agent. You must designate an of the registered agent are:	ent's Signature: individual or another
Name	
ss (P.O. Box <u>NOT</u> acceptable)	
FL 33193	
Zip	
ated in this certificate, I hereby acc capacity. I further agree to compa aplete performance of my duties, an	cept the appointment as y with the provisions of all ad I am familiar with and
	the principal office of the Limite Mailing Address: 15818 SW 69th Lane Miami, FL 33193 istered Office, & Registered Age of the registered agent are: Name Name S (P.O. Box NOT acceptable) FL 33193

Fitle <u>:</u>	Name and Address:	li l
'AMBR" = Authorized Member	- <u></u>	II.
'MGR" = Manager		il i
AMBR	Lizette Z. Cueto	
	15818 SW 69th Lane	
	Miami, FL 33193	
MGR	Cesar M. Perez	
	15818 SW 69th Lane	-
	Mami, FL 33193	-
		<u> </u>
	 	<u> </u>
		11
		l)
		<u> </u>
Use attachment if necessary)		
		i i
LE V: Other provisions, if any.		
		<u> </u>
		<u> </u>
REQUIRED SIGNATURE:		l)

as provided for in s.817.155, F.S.

Lizette Z. Cueto

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 5.00 Certificate of Status (Optional) \$ 30.00 Certified Copy (Optional)