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(Requestor's Name)
(Address)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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08/27/24--01802--009 ****15**0.00

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: MAYAK LOGISTICS LLC (Name of Resulting Florida Limited Company)	
The enclosed Articles of Conversion. Articles of Organization, and fees are submitted to convert an "Ot Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.	her
Please return all correspondence concerning this matter to:	
ANASTASIYA PASCHAC (Contact Person) Surflawer Translation Services LLC (Firm/Company) 5200 NW 431d St Ste 102-335	3 3 3 7 9
(Address)	
Gainesville FL 32606 (City, State and Zip Code) Sunflower services (C Qyahoo, com E-mail Address: (to be used for future annual report notifications)	· .
For further information concerning this matter, please call:	
ANASTASIYA PASCHAC at (386) 338 5455 (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 U dollars and drawn on a bank located in the United States)	IS
☐ \$150.00 Filing Fees (\$25 for Conversion & S125 for Articles of Organization) ☐ \$155.00 Filing Fees and Certificate of Status ☐ \$180.00 Filing Fees and Certified Copy ☐ \$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Address:Street Address:New Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre 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 MAYAK LOGISTICS LLC	Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	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)
on 05 16 2022 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of	of Organization: ¬
MAYAK LOGISTICS LLC	: 47
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date: OF QQQY. (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 cale 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 adocument'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 09 day of September	<u>V 20 0 .</u>	
Signature of Authorized Representative of Limi		
Signature of Authorized Representative: Printed Name: Ilgar MAHMATON	Title: AMBR	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	
Signature: Sontaria Parchal		
Printed Name: ANASTRIVA PASCHAL	Title: Authorized agent	
Signature:		
Signature: Printed Name: SIGN MAHMATOV	Title: AMBR	
Signature:		
Printed Name:	Title:	
Signature:		292
Printed Name:		2924 CCT
Signature:		-1 -7
Printed Name:	Title:	,y1
Signature:		.;
Printed Name:	Title:	·2.
If Florida Corporation:	••	7
Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.		
	,	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	ty Limited Partnership:	
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:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
MAYAK LOGISTICS LLC
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
12034 Tuscary Bay Dr Apt 301 Tampa FL 33626 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: ?
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:
Ilgar Nahmatov Name
12034 Tuscary Bay Apt 301 Florida street address (P.O. Box NOT acceptable)
Tampa FL 33626 City Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as 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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager AMBR	Thear Mahmatal Bost Tuscam Bayar apt 301 Tampa El 33626
(Use attachment if necessary)	
CLE V: Other provisions, if any.	; <u></u>
	!
REQUIRED SIGNATURE:	An .
This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b). Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony
1 gar ()	ped or printed name of signee
131	Filing Fees

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