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(Requestor's Name)
(Address)
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(,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Basilless Entity Hallie)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
DEVICE WALKER WALLER
2545 W2400142474
Office Use Only



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COVER LETTER

Division of Co						
SUBJECT: SILVER L	EAF TRANSPORT LLC					
SUBJECT:	(Name of Resu	ılting Florida Lim	ited Com	ipany)	<u> </u>	
The enclosed Articles Business Entity" into						
Please return all corre	spondence concerning	this matter to:				
JERIMIAH MCQUEEN						
	(Contact Person)		_			
	(Firm/Company)		_			
1501 NE 22ND ST						
	(Address)		_			
OCALA FL, 34470						
(C	ity, State and Zip Code)		_			
silverleaftransport@my	yahoo.com		_			
E-mail Address: (to be	used for future annual rep	oort notifications)	_			
For further informatio	n concerning this mat	ter, please call:				
JERIMIAH MCQUEEN)229-7			
(Name of Contac	et Person)	(Area Code	(Day	time Telephone Number)	
Enclosed is a check for dollars and drawn on a			process	sed by this office mu	st be payab	ole in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)		S180.00 Filin and Certified Co	•	S185.00 Filing Fees Certified Copy, and Certificate of Status	,	:
Mailing Addr New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7		New I Divisi The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Sonassee, FL 32303	1	2024 SEP 17 N.M 9:0

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: SILVER LEAF TRANSPORT LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
on 4/9/3013 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
SILVER LEAF TRANSPORT 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 Rusiness 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 13 day of SEPTEMBER	_ 20 <u>24</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Penrecentative:	INC.
Signature of Authorized Representative: 7/1/2 Printed Name: JERIMIAH MCQUEEN JR	Title: OWNER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature: Sent McCour	
Printed Name: JERIMIAH MCQUEEN	Title: PRESIDENT/OWNER/TREASUR
Frinted Name, <u>Servivanti Mogocer</u>	Title. Theoreti Treatment
Signature:	
Printed Name:	Title:
Signature:Printed Name:	<u> </u>
Printed Name:	Title:
Signature	
Signature:Printed Name:	Title
i i i i i i i i i i i i i i i i i i i	
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Tiela.
Printed Name:	riue:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

•ARTICLE I - Name: The name of the Limi	ted Liability Company is:		
SILVER LEAF TRANSF	PORT LLC ontain the words "Limited Liability	Company of 1 C "or of 1 C")	
	·	Company, "L.L.C., or "LLC.)	
ARTICLE II - Addr The mailing address a		ncipal office of the Limited	Liability Company is:
Principal Office Add	lress:	Mailing Address:	
1501 NE 22ND ST		1501 NE 22ND ST	
OCALA FL, 34470		OCALA FL,34470	_
(The Limited Liability Comp business entity with an active The name and the Flo.	any cannot serve as its own Registe	Office, & Registered Ager red Agent. You must designate an in gistered agent are:	
F	Florida street address (P.O.	Box NOT acceptable)	
00	CALA	FL 34470	
	City	Zip	
liability company registered agent and statutes relating to	v at the place designated in I agree to act in this capaci o the proper and complete p	accept service of process for this certificate, I hereby access by. I further agree to comply terformance of my duties, and istered agent as provided for ture (REQUIRED)	ept the appointment as with the provisions of all d I am familiar with and

(CONTINUED)

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
MANAGER	JERIMIAH MCQUEEN JR	
.	1501 NE 22ND ST	
	OCALA, FL 34470	
AMBR	JERIMIAH MCQUEEN	
	1501 NE 22ND ST	
	OCALA FL 34470	
AMBR	JAKEEM MCQUEEN	· ? 21
	1501 NE 22ND ST	2024
	OCALA FL 34470	. II III
		The state of the s
(Har attack mout if accordance)		740
(Use attachment if necessary)		00 الـ1

ARTICLE V: Other provisions, if any.

JERIMIAH MCQUEEN JR IS THE BUSINESS OWNER, JERIMIAH MCQUEEN (FATHER) IS PRESIDENT VETERAN OWNED IS THE BUSINESS MANAGER, VICE PRESIDENT AND TREASURE. JAKEEM MCQUEEN IS SECRETARY AND MANAGER. JERIMIAH MCQUEEN FATHER OWN 70% OF BUSINESS

REQUIRED SE	GNATJURE:		
 /	Mr.		
PRU	112000		
	· 	 · · · · · · · · · · · · · · · · · · ·	

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

JERIMIAH MCQUEEN				

Typed or printed name of signee

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)

Control No.: 13402284

STATE OF GEORGIA

Secretary of State
Corporations Division
313 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF ORGANIZATION

I, Brian P. Kemp, The Secretary of State and the Corporation Commissioner of the State of Georgia, hereby certify under the seal of my office that

SILVER LEAF TRANSPORT LLC

a Domestic Limited Liability Company

is hereby issued a CERTIFICATE OF ORGANIZATION under the laws of the State of Georgia on **April 09, 2013** by the filing of all documents in the Office of the Secretary of State and by the paying of all fees as provided by Title 14 of the Official Code of Georgia Annotated.

WITNESS my hand and official seal in the City of Atlanta and the State of Georgia on April 16, 2013



Brian P. Kemp Secretary of State

Conversion 1240000441305

Please release the business entity's name for use regarding Silver Leaf Transport LLC

Jegiman Mc Queen

2024 OCT 18 AM 5: 41