# L24000453751

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





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## COVER LETTER

<b>TO:</b> New Filing S Division of C					
SUBJECT: Teleo Lo	gistics LLC				
SOBOLCI.	(Name of Re	sulting Florida Limi	ted Con	npany)	
	s of Conversion, Artic a "Florida Limited L	~			
Please return all corr	espondence concernin	g this matter to:			
Josiah Cree					
	(Contact Person)		_		
Teleo Logistics LLC					
	(Firm/Company)		_		
433 Wambaw Dr					297
	(Address)	<del>-</del> -	_		300
Saint Johns, FL 32259					2023 OCT 23
((	City, State and Zip Code)		_		
josiah.cree@teleologis	ticslic.com				
E-mail Address: (to b	e used for future annual re	port notifications)	-		~ <del>1</del>
For further informati	on concerning this ma	tter, please call:			æ
Josiah Cree		at ( <sup>651</sup>	747-	5001	
(Name of Conta	ct Person)		) (Day	time Telephone Numbe	r)
dollars and drawn on	For the following amou	United States)			
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		□\$185.00 Filing Fee: Certified Copy, and < Certificate of Status	
Mailing Add	ress:		Stree	t Address:	
New Filing S	ection			Filing Section	
Division of C	-			ion of Corporations Centre of Tallahassee	3
P.O. Box 632	. /		THE	chile of Tallallassee	-

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 Teleo Logistics LLC	Articles of Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Limited Liability Corporation  (Enter entity type. Example: corporation, limited partnership, general partnership,	
(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. en	20
10/2/2021	2.100
on  (date of organization, formation or incorporation)  3. The name of the Florida Limited Liability Company as set forth in the attache	d Articles of Organization:
Teleo Logistics LLC	
(Enter Name of Florida Limited Liability Company)	<del></del>
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 that 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, document's effective date on the Department of State's records.	than 90 calendar days after
5. The plan of conversion has been approved in accordance with all applicable sta	tutes.
6. The "Converted or Other Business Entity" has agreed to pay any members having which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	appraisal rights the amount to

Signed this 18 day of October	20 29
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:  Printed Name: Josiah Cree	Tile: Owner
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
	_
Signature: Printed Name: Josiah Cree	Title: Owner
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title
Timed Name.	
Signature:	_ Title:
Printed Name:	_ Title.
Signature:	
Printed Name:	_ little:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, 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 Liability Signatures of ALL General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fccs:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy:	\$25.00 \$125.00 \$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:
Teleo Logistics LLC	
(Must contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Teleo Logistics LLC	Teleo Logistics LLC
433 Wambaw Dr	433 Wambaw Dr
Saint Johns, FL 32259	Saint Johns, FL 32259
433 Wambaw Dr	ame P.O. Box NOT acceptable)
Saint Johns	FL 32259
City	Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet accept the obligations of my position as	In this certificate, I hereby accept the above stated limited d in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and 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:

"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Josiah Cree
	433 Wambaw Dr
	Saint Johns, FL 32259
	12.5°
<del></del>	
	ا مراجع المراجعة
(Use attachment if necessary)	· - ·
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(Use attachment if necessary)  LE V: Other provisions, if any.	
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LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.  REQUIRED SIGNATURE:	
LE V: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member of	r an authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance any false information submitted in a doc	
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance.	r an authorized representative of a member se with section 605.0203 (1) (b), Florida State am away
Signature of a member of This document is executed in accordance any false information submitted in a doc as provided for in s.817.155, F.S.	r an authorized representative of a member se with section 605.0203 (1) (b), Florida State am away
REQUIRED SIGNATURE:  Signature of a member of This document is executed in accordance any false information submitted in a doc as provided for in s.817.155, F.S.  Josiah Cree	r an authorized representative of a member se with section 605.0203 (1) (b), Florida State am away

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)



#### FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

Attached is a form to convert an "Other Business Entity" into a "Florida Limited Liability Company" pursuant to section 605.1045, Florida Statutes. These forms are basic and may not meet all conversion needs. The advice of an attorney is recommended.

Pursuant to s. 605.0102(23)a, F.S., entity means: a business corporation, a nonprofit corporation, a general partnership, including a limited liability partnership, including a limited partnership, including a limited liability limited partnership; a limited liability company; a real estate investment trust; or any other domestic or foreign entity that is organized under an organic law.

\$150.00 (\$25 for Articles of Conversion and Filing Fees:

\$125 for Articles of Organization)

\$30.00 Certified Copy (optional):

\$5.00 Certificate of Status (optional):

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

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 Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

For further information, you may contact the New Filing Section at (850) 245-6052.

Important Notice: As a condition to the conversion, pursuant to s.605,0212(9), F.S., each party to the conversion must be active and current through December 31 of the calendar year this document is being submitted to the Department of State for filing.

INHS11 (7/17)