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(Requestor's Name)			
(Address)			
(Add	dress)		
(City	//State/Zip/Phone	= #)	
PICK-UP	MAIT WAIT	MAIL	
(Bus	siness Entity Nar	ne)	
(Doe	cument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to f	Filing Officer:		

Office Use Only



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COVER LETTER

TO: Charter Section

Division of Corporations

SURJECT: VMT LOGISTICS, INC

Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Paulo Oliveira

Contact Person

Eagle Tax Representation Corp

Firm/Company

5493 Wiles Road Ste 105

Address

Coconut Creek, FL - 33073

City, State and Zip Code

paulo@eagle-tax.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paulo Oliveira, EA

_{+ (}954

532-3842

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

105.00 Filing Fees

☐\$113.75 Filing Fees and Certificate of Status □\$113.75 Filing Fees and Certified Copy

☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status

STREET ADDRESS:

New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filings Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314



June 4, 2014

PAULO OLIVEIRA 5493 WILES RD., STE 105 COCONUT CREEK, FL 33073

SUBJECT: VMT LOGISTICS LLC Ref. Number: L13000079529

We have received your document for VMT LOGISTICS LLC and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 214A00012044

Carol Mustain Regulatory Specialist II

www.sunbiz.org

Certificate of Conversion
For

"Other Business Entity"
Into
Florida Profit Corporation

SECRETARY OF STATE
DIVISION OF CORPORATIONS

This Certificate of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

VMT LOGISTICS LLC

								•	
2.	The '	'Other	Business	Entity"	is a	Limited	Liability	Com	pany

(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)

Enter Name of Other Business Entity

first organized, formed or incorporated under the laws of Enter state, or if a non-U.S. entity, the name of the country) on 06-03-2013

Enter date "Other Business Entity" was first organized, formed or incorporated

- 3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:
- 4. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u>

VMT LOGISTICS, INC

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: 06-19-2014

(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

Signed this day of	, 20_14
Required Signature for Florida Profit Corporat	ion:
Signature of Chairman, Vice Chairman, Director, Cobeen selected, an Incorporator: Y MNU MULLI Printed Name: ANNEMARIE L MORELLI Title:	Officer or, if Directors or Officers have not
Required Signature(s) on behalf of Other Business signature(s).] Signature: MML MML L. Moull'	s Entity: [See below for required
Printed Name: ANNEMARIE MORELLI	Title: PRESIDENT
Signature: Y Printed Name: MIGUEL R PUERTA	Title: VICE PRESIDENT
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	_ Title:
Signature:Printed Name:	Title:
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.	ty Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative	
All others: Signature of an authorized person.	
Fees: Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporation shall be: VMT LOGISTICS, INC					
LRTICLI he princip	E II PRINCIPAL OFFICE pal place of business/mailing address is:		ان 9: وا		
	Principal street address	Mailing address, if different is:			
123 G	reenwich Cir	123 Greenwich Cir			
Jupite	r, FL - 33458	Jupiter, FL - 33458			
	e III PURPOSE use for which the corporation is organized is: nd all lawful business.				
	EIV SHARES er of shares of stock is: 1,000				
RTICLE	Appendia Maralli Pros	Name and Title: Miguel R Puerta - V	′.P.		
.ddress:	123 Greenwich Cir	Address: 123 Greenwich Cir			
	Jupiter, FL - 33458	Jupiter, FL - 33458			
lame and	Title: Vera L Miranda - Director	Name and Title:			
ddress:	123 Greenwich Cir	Address:			
	Jupiter, FL - 33458				
lame and	Title:	Name and Title:			
ddress:		Address:			
ARTICLI	E VI REGISTERED AGENT and Florida street address (P.O. Box NOT acce Eagle Tax Representation, Corp	eptable) of the registered agent is:			
Inma	Eagle Tax Representation, Corp				
lame:	5493 Wiles Road Ste 105				

ARTICLE The name a	INCORPORATOR and address of the Incorporator is:				
Name:	Annemarie L Morelli				
Address: 123 Greenwich Cir					
	Jupiter, FL - 33458				
*****	**********	*******			
designated		service of process for the above stated corporation at the place accept the appointment as registered agent and agree to act in this			
capacity					
	The state of the s	06-07-2014			
	Required Signature/Registered Agent	Date			
I submit this document and affirm that the facts stated herein are true. 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.					
	Junior .	06-07-2014			
	Required Signature/Incorporator	Date			