(Re	equestor's Name)	
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Ви	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only

N. SAMS OCT 2 5 2016



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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 30, 2016

GILBERTO TORRES LIMA 14015 SANCTUARY TRL ORLANDO, FL 32832

SUBJECT: TL TRANSPORT INC Ref. Number: W16000067430

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

It appears that the word in the name of this entity is misspelled. If this misspelling was intentional, simply resubmit the document with the word spelled. If you did not misspell this word intentionally, please correct the spelling to read, and resubmit the document for processing.

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.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 516A00021097

#ECHCINAL ALSTATE

COVER LETTER

Division of Corporations						
SUBJECT: TL TRANSPORT INC						
	Resulting Flor	ri da Pr ofit	Corporation			
The enclosed Certificate of Conversion, Articles Entity" into a "Florida Profit Corporation" in ac	cordance with			vert an "C)ther B	usiness
Please return all correspondence concerning this	matter to:					
GILBERTO TORRES LIMA						
Contact Person	·					
				· vn	~ `	
Firm/Company				25	2916 SEP	
	ADI			À	SEP .	
14015 SACTUARY TRL Apt. 6-305 Address				SA	29	. •
Address				The figure	3	
ORLANDO, FL 32832					PH 12: 5	
City, State and Zip Code			•	14.	UP UP	
IRCOLON79@GMAIL.COM						
E-mail address: (to be used for future annu	ual report noti	fication)				
For further information concerning this matter,	please call:					
GILBERTO TORRES LIMA	_at (644-2	023			
Name of Contact Person	Are	a Code and	Daytime Telephone Nu	ımber		
Enclosed is a check for the following amount:						
S105.00 Filing Fees and Certificate of Status	□\$113.75 F and Certifie		S122.50 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		New F Division P. O. I	ING ADDRESS: Filings Section on of Corporations Box 6327 assec, FL 32314			

Certificate of Conversion For

"Other Business Entity"
Into

Florida Profit Corporation

2016 SEP 29 PM 12: 55

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BECKETARY TO TALLAHASSES FLORES.

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

The Transport LLC
Enter Name of Other Business Entity
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)
first organized, formed or incorporated under the laws of FLORIDA
(Enter state, or if a non-U.S. entity, the name of the country)
07/01/2016
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:
ORANGE COUNTY .
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
TL TRANSPORT INC
Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date:
(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; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Incorporation if an effective date is listed therein.)
Note: If the date inserted in this block docs 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.

Signed	this day of August	, 20 <mark>16</mark>
Requi	red Signature for Florida Profit Corporation	
Signate Incorpo Printed	prator GILBERTO TORRES LIM Title: PRESI	cer, or, if Directors or Officers have not been selected, an
Requi	red Signature(s) on behalf of Other Business	Entity: [See below for required signature(s).]
	ire: Subort Fares Leve	
Printed	Name: GILBERO Torres	_Title: <u>President</u>
Signate	ıre:	
Printed	Name:	Title:
Signate	ure:	
Printed	l Name:	Title:
Signati	ore:	
Printed	l Name:	Title:
Signati	ure:	
Printed	l Name:	Title:
Signati	ure:	
Printed	Name:	Title:
	ida General Partnership or Limited Liability are of one General Partner.	y Partnership:
If Flor Signat	rida Limited Partnership or Limited Liability ures of <u>ALL</u> General Partners.	Limited Partnership:
	rida Limited Liability Company: ure of a Member or Authorized Representative.	
All oth Signati	ners: ure of an authorized person.	
Fecs:	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)

ETICLE II PRINCIPAL OFFICE principal place of business/mailing address is:		
Principal street address 115 SANCTUARY VIEW TRL Apt 6-305 ACC	Mailing addre	ess, if different is:
ETICLE III PURPOSE purpose for which the corporation is organized is: LIAWFULL ACTIVITIES		
TICLE IV SHARES 100		
ETICLE IV SHARES e number of shares of stock is:		2816 SEP
TICLE IV SHARES 100 e number of shares of stock is: TICLE V INITIAL OFFICERS AND/OR DID GURERTO TORRES LIMA ORIG	RECTORS	2816 SEP
TICLE IV SHARES number of shares of stock is: TICLE V INITIAL OFFICERS AND/OR DID me and Title: GILBERTO TORRES LIMA PRES	RECTORS Name and Title:	2816 SEP 29 PR
TICLE IV SHARES number of shares of stock is: TICLE V INITIAL OFFICERS AND/OR DID ne and Title: 14015 SANCTHARY VIEW TRI APP	RECTORS Name and Title: Address:	2816 SEP 29 PM 12: 5:
TICLE IV SHARES 100 enumber of shares of stock is: TICLE V INITIAL OFFICERS AND/OR DID me and Title: GILBERTO TORRES LIMA PRES 14015 SANCTUARY VIEW TRL 6-305 ORLANDO FL 328832	RECTORS Name and Title: Address:	2816 SEP 29 PM 12: 37
enumber of shares of stock is: ETICLE V INITIAL OFFICERS AND/OR DID me and Title: GILBERTO TORRES LIMA PRES 14015 SANCTUARY VIEW TRL 6-305 ORLANDO FL 328832 me and Title:	Name and Title: Name and Title:	2816 SEP 29 PM 12: 55
ETICLE IV SHARES Inumber of shares of stock is: ETICLE V INITIAL OFFICERS AND/OR DID The and Title: GILBERTO TORRES LIMA PRES 14015 SANCTUARY VIEW TRL 6-30-5 ORLANDO FL 328832 The and Title:	Name and Title: Address: Name and Title: Address:	ALL AHASSESTED SET

!TICLI	E VI REGISTERED AGENT	
: name	and Florida street address (P.O. Box	NOT acceptable) of the registered agent is:
me:	GILBERTO TORRES LIMA	
dress:	14015 SANCTUARY VIEW TRL App	6-305
	ORLANDO FL 32832	JULI
<u>:TICLI</u>		
: <u>name</u>	and address of the Incorporator is:	
ne:	GILBERTO TORERS LIMA	
dress: 14015 SANCTUARY VIEW TRL Apr. 6-305.		6-305.
	ORLANDO FL 32832	Just .
		******** t service of process for the above stated corporation at the place designated in appointment as registered agent and agree to act in this capacity
	Required Signature/Registered Agent	Date
	roduios organicios reguneres rigen	Duk
		stated herein are true. I am aware that any false information submitted in a a third degree felony as provided for in s.817.155, F.S.
H	Mats Janes Kerre	8/1/14
	Required Signature/Incorporator	Date