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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

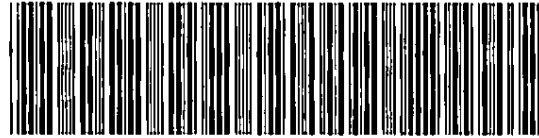
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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17 JUL 14 AM 8:22
STATE
FLORIDA

W17-022222

✓ 07/17/17

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: Trucking One Transport, 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:

Robert G. Troup

Contact Person

Troup Financial Services

Firm/Company

4343 S. Ridgewood Avenue Suite A-1

Address

Port Orange, FL 32127

City, State and Zip Code

trouptfinancial@gmail.com

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

For further information concerning this matter, please call:

Robert G. Troup

at (386)

756-1208

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> \$105.00 Filing Fees | <input type="checkbox"/> \$113.75 Filing Fees
and Certificate of
Status | <input type="checkbox"/> \$113.75 Filing Fees
and Certified Copy | <input type="checkbox"/> \$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

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

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.

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

Trucking One Transport, LLC

(L14-105552)✓

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)

on July 2, 2014 ✓

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 **attached Articles of Incorporation**:

Trucking One Transport, Inc.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: July 1, 2017

(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.)

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.

17 JUL 16 AM 8:22
DEPT. OF STATE
FLORIDA

Signed this 10th day of July, 2017.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, Incorporated: Zbigniew Kossewski Zbigniew Kossewski
Printed Name: Zbigniew Kossewski Title: President - Director

Required Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]

Signature: Zbigniew Kossewski

Printed Name: Zbigniew Kossewski Title: PSTD

Signature: Beata Kossewski

Printed Name: Beata Kossewski Title: VP

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

<u>Fees:</u>	
Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

17 JUL 14 AM 8:22
CLERK OF THE CIRCUIT COURT
STATE OF FLORIDA

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

17 JUL 16 AM 8:22
PORT ORANGE FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Trucking One Transport, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address <u>6 Springwood Square</u> <u>Port Orange, FL 32129</u> _____ _____	Mailing address, if different from principal address _____ _____ _____
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ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose of this corporation is to operate as an over the road trucking company, and for any and all lawful purposes.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Zbigniew Kossewski, PSTID</u> Address: <u>6 Springwood Square</u> <u>Port Orange, FL 32127</u> _____ Name and Title: <u>Beata Kossewski</u> Address: <u>6 Springwood Square</u> <u>Port Orange, FL 32129</u> _____ Name and Title: _____ Address: _____ _____	Name and Title: _____ Address: _____ _____ Name and Title: _____ Address: _____ _____ Name and Title: _____ Address: _____ _____
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ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Zbigniew Kossewski
Address: 6 Springwood Square
Port Orange, FL 32129

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Zbigniew Kossewski
Address: 6 Springwood Square
Port Orange, FL 32129

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Zbigniew Kossewski
Required Signature/Registered Agent

July 10, 2017
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.

Zbigniew Kossewski
Required Signature/Incorporator

July 10, 2017
Date

17 JUL 16 AM 8:22
OFFICE OF THE CLERK
STATE OF FLORIDA