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то:	Charter Section Division of Cor					
SHRI	Jump Logist	ties LLC				
SODJ	EC1	Name of	Resulting Flor	ida Profit	Corporation	
		e of Conversion, Article: Profit Corporation" in ac			ees are submitted to convert an "Oth 15, F.S.	er Business
Pleaso	e return all corresp	ondence concerning this	s matter to:			
MYRI	IAM VARGAS					
		Contact Person				
TRUC	CKING PERMITS &	& MORE LLC				
		Firm/Company				
1721	W HILLSBOROUC	GH AVE				
	·	Address				
ТАМІ	PA FL 33603					
		City, State and Zip Code	<u> </u>			
MYRI	IAM@TRUCKING	PERMITSANDMORE.CO)M			
	E-mail address: (t	o be used for future annu	ial report notif	ication)		
For fu	irther information	concerning this matter.	please call:			
MYRI	IAM VARGAS		813	77447	26	
	Name of Co	ontact Person		Code and	l Daytime Telephone Number	
Enclo	sed is a check for	the following amount:				
1 \$10	05.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	☐ 113.75 Fi and Certified		S122.50 Filing Fees, Certified Copy, and Certificate of Status	
New I Divisi Clifto 2661	EET ADDRESS: Filings Section ion of Corporation in Building Executive Center massee, FL 32301			New F Division P. O. E	ING ADDRESS: illings Section on of Corporations Box 6327 assee, 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 Enti	ty" immediately prior to the filing of this Certificate of Con	wersion	is:	
JUMP LOGISTICS LLC	416-232474	Ϊ.	17	
	Enter Name of Other Business Entity	· ·	SS	
2. The "Other Business Entity" is a LLC		·	P 21	
	Example: limited liability company, limited partnership, tip, common law or business trust, etc.)			
first organized, formed or incorporated ur	Florida		င္ပံာ	
(Enter stat	e, or if a non-U.S. entity, the name of the country)	<u> </u>	ទី២	
12/27/16 on				
	Business Entity" was first organized, formed or incorporated	i		
3. If the jurisdiction of the "Other Busine organized, formed or incorporated: N/A	ess Entity" was changed, the state or country under the laws	of which	ch it is	пом
4. The name of the Florida Profit Corpor JUMP LOGISTICS INC	ation as set forth in the attached Articles of Incorporation	<u>1:</u>		
I	Inter Name of Florida Profit Corporation			
5. If not effective on the date of filing, er	nter the effective date:			
(The effective date: Cannot be prior to Department of State.)	nor more than 90 days after the date this document is f	îled by	the Fl	orida
Note: If the date inserted in this block do	es not meet the applicable statutory filing requirements, thi	is date v	vill no	t be
listed as the document's effective date on	the Department of State's records.			

Signed thisday of	. 20						
Required Signature for Florida Profit Corporation:							
Signature of Chairman, Vice Chairman, Director, Office Incorporator: Printed Name: BLAKE SHELTON Title: MGR	er, or, if Directors or Officers have not been selected, an						
Required Signature(s) on behalf of Other Business J	Eatity: [See below for required signature(s).]						
	Signature:						
Printed Name: BLAKE SHELTON	Title:						
Signature:							
Printed Name:	Title:						
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.	Partnership:						
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	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)						

Page 2 of 2

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

ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is
1136 RIVAGE CIRCLE APT.#1136	1136 RIVAGE CIRCLE APT.#1136
BRANDON FL 33511	BRANDON FL 33511
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
ANY AND ALL LAWFUL BUSINESS.	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR D	DIRECTORS
	DIRECTORS
ARTICLE V INITIAL OFFICERS AND/OR D	DIRECTORS
Name and Title: BLAKE SHELTON 1136 RIVAGE CIRCLE APT 1136	VIRECTORS Name and Title:
ARTICLE V INITIAL OFFICERS AND/OR D Name and Title: BLAKE SHELTON 1136 RIVAGE CIRCLE APT 1136 BRANDON FL 33511	Name and Title: Address:
ARTICLE V INITIAL OFFICERS AND/OR D Name and Title: BLAKE SHELTON 1136 RIVAGE CIRCLE APT 1136 BRANDON FL 33511 Name and Title:	Name and Title: Address: Name and Title:
ARTICLE V INITIAL OFFICERS AND/OR D Name and Title: BLAKE SHELTON Address: BRANDON FL 33511 Name and Title:	Name and Title: Address: Name and Title: Address:
ARTICLE V INITIAL OFFICERS AND/OR D Name and Title: BLAKE SHELTON 1136 RIVAGE CIRCLE APT 1136 BRANDON FL 33511 Name and Title: Address:	Name and Title: Address: Name and Title: Address:
ARTICLE V INITIAL OFFICERS AND/OR D Name and Title: BLAKE SHELTON 1136 RIVAGE CIRCLE APT 1136 BRANDON FL 33511 Name and Title:	Name and Title: Address: Name and Title: Address:

ARTICL	E VI REGISTERED AGENT				
The name	and Florida street address (P.O. Box NOT accepta	able) of the registered agent is:			
Name:	TRUCKING PERMITS & MORE LLC				
Address:	1721 W HILLSBOROUGH AVE		٠.٠		
	TAMPA FL 33603			EP 2	Ţ
ARTICL				I AM	i EO
i ne <u>name</u>	and address of the Incorporator is:			ထ္	
Name:	BLAKE SHELTON		7	СЛ	
Address:	1136 RIVAGE CIRLE APT.#1136		•	_	
	BRANDON 33511				
******** Huving be this certifi	een named as registered agent to accept service of picute, I am familiar with and accept the appointment	rocess for the above stated corporation at t as registered uyent and agree to act in th	the place is capacity	design ,	ated in
- <u>,</u>	Required Signature/Registered Agent	Date			
I submit to document	his document and affirm that the facts stated herein to the Department of State constitutes a third degre	n are true. I am aware that any false info e felony as provided for in s.817.155, F.S.	ormation s	ubmitt	ed in a
		,			
غنخ نشتيمر	Sharton Tate	9/15/17			
	Required Signature/Incorporator	Date			