01800/00502

(Requestor's Name)	_
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	٦
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<u> </u>	

Office Use Only

M. MOON

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FILED

18 DEC 13 PM 1: 41

SECREWAY OF STATE

W18-104671



December 4, 2018

LIZ GEHRLICH 108 NE 6TH AVE WILLISTON, FL 32696

SUBJECT: THEFLBEARS TRUCKING LLC

Ref. Number: W18000104671

We have received your document for THEFLBEARS TRUCKING 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):

Please provide the name of the Florida Profit Corporation as set forth in the attached articles in number 4.

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.

Matthew T Moon Regulatory Specialist III

Letter Number: 318A00024848

COVER LETTER

TO:

Charter Section

Tallahassee, FL 32301

Division of Cor	porations				
THEFLBEA	RS TRUCKING LLC				
SUBJECT:	Name of	Resulting Flor	rida Profit	Corporation	_
The enclosed Certificate Entity" into a "Florida P				ees are submitted to conve 15, F.S.	ert an "Other Business
Please return all corresp	ondence concerning this	matter to:			
LIZ GEHRLICH					
	Contact Person				
SANDERS BOOKKEEP	ING & TAX SERVICES				
	Firm/Company	-			
108 NE 6TH AVE					
	Address			<u>_</u>	
WILLISTON, FL 32696					BECLIS PHILLS
	City, State and Zip Code	2			翌日一
ADMIN@SANDERS-FI	NANCIAL.COM				SA PA
E-mail address: (to	be used for future annu	ial report noti	fication)		
For further information	concerning this matter,	please call:			95 5
JEFF TINDALE		352 at (486-3	939	200
Name of Co	ntact Person		a Code and	l Daytime Telephone Nur	nber
Enclosed is a check for	the following amount:				
■ \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 F and Certified		☐\$122.50 Filing Fees. Certified Copy, and Certificate of Status	
STREET ADDRESS: New Filings Section Division of Corporation Clifton Building 2661 Executive Center 6			New F Division P. O. E	ING ADDRESS: Tilings Section on of Corporations Box 6327 assee, FL 32314	

L1800260173

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

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.

Enter Name of Other Business Entity
·
2. The "Other Business Entity" is a
(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
(Enter state, or if a non-U.S. entity, the name of the country)
11/06/2018 on .
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: The FLORARS TYUCLING TDC. Enter Name of Florida Profit Corporation
5. If not effective on the date of filing, enter the effective date: (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Floric Department of State.) 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.

Page 1 of 2



. 19th November Signed thisday of	, 20 <mark></mark> .			
Required Signature for Florida Profit Corporation	<u>:</u>			
Signature of Chairman, Vice Chairman, Director, Office Incorporator: Printed Name: Jeff Tindale Title: Manage	cer, or, if Directors or Officers have not been	n selected	i, an	
Required Signature(s) on behalf of Other Business	Entity: [See below for required signature(s).]		
Signature: Joseph Turclale				
Printed Name: JEFP Tircole	_ Title: <u>Ambe Navag</u>	ev -		
Signature:	U)		
Printed Name:	Title:			
Signature:				
Printed Name:	Title:			
Signature:				
Printed Name:				
Signature:				
Printed Name:				
Signature:				
Printed Name:				
If Florida General Partnership or Limited Liability Signature of one General Partner. If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.				
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	•	SEC	18 [
All others: Signature of an authorized person.		ECRETAKY:	18 DEC 13 F	FILE
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)	Allahu Is.	PM 1: 41	

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

The name of the corporation shall be: THEFTE	EARS	Truckin	g Mc.	
			,	
he principal place of business/mailing address is:				
Principal street address 031 SE 121ST Terrace Morriston, FL 32668		Mailing address	s, if different is:	
50 1 02 12 10 1 10 11 20 11 10 11 10 10 10 10 10 10 10 10 10 10				
he purpose for which the corporation is organized is:				
				
			 	
	· · · · · ·			
				 -
_ 			· · · · · · · · · · · · · · · · · · ·	
	•			
number of shares of stock is:				
			•	
ie and Title! Jeff Tindale Ambr	Name and Tit	ile:	SEC	18
ress: 10031 SE 121st Terrace	Address:		光流	ec -
	Address.			<u> </u>
Morriston, FL 32668				- 2 (
e and Title:	Name and Tit	.le:	FI ORIC	<u></u> (
ess:	Address:			
ess:	Address:		<u> </u>	
	Address:		<u></u>	

(P.O. Box NOT acceptable	e) of the registered agent is:	
vame: Pff Tindale		
Address: 6031 SE Wist Terrore		
Marriston, pc 32 668		
he name and address of the Incorporator is:		
vame: Jeff Tindale		
Address: 10031 SE 121St Terrace		
Wormston, FC 32 lass		
\ <u>-</u>		
*******************************	********	•
'aving been named as registered agent to accept service of processis certificate, I am familiar with and accept the appointment as		in
Jelh Tudelle	11-20-18	
Required Signature/Registered Agent	Date	
submit this document and affirm that the facts stated herein as cument to the Department of State constitutes a third degree fe		14
\allow don don do	11-20-15	
Required Signature/Incorporator	Date	
	ALEGE TO	
	PILED CARASSEE FI	
	The B	
	FILED 18 DEC 13 PH 1: 41 SECRETARY OF STATE FALLAHASSEE FRORID	
	To The Table	