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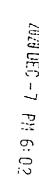
(Re	equestor's Name)	
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

•	
TO: New Filing Section Division of Corporations	
SUBJECT: KOKOTIKO TRANSPOF	RT, INC.
Name of Resulting Flo	orida Profit Corporation
The enclosed Articles of Conversion, Articles of Incorporation into a "Florida Profit Corporation" in accordance with	on, and fees are submitted to convert the following eligible ss. 607.11933 & 607.0202, F.S.
Please return all correspondence concerning this matter to:	
ANTOINETTE REYES	
Contact Person	
ARIES INCOME TAX PREPARATION, INC	> .
Firm/Company	
105 E LANCASTER RD	
Address	
ORLANDO, FL 32809	
City, State and Zip Code	
ARIESITP@LIVE.COM	
E-mail address: (to be used for future annual report not	ification)
For further information concerning this matter, please call:	\802 - 4615
ANTOINETTE REYES at (407 Name of Contact Person Are	ea Code and Daytime Telephone Number
Enclosed is a check for the following amount:	1023
□ \$105.00 Filing Fees ■\$113.75 Filing Fees □\$113.75 and Certificate of and Certific Status	ed Copy Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Conversion For Converting Eligible Entity Into Florida Profit Corporation

The Articles of Conversion and attached Articles of Incorporation are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

business entity into a Florida Front Corporation in accordance with 35: 007.11755 to 007.0202. 1 issual outside	
. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:	
KOKOTIKO TRANSPORT, LLC	
Enter Name of the Converting Entity	
2. The converting entity is a LIMITED LIABILITY COMPANY	
(Enter entity type. Example: limited hability company, limited partnership, general partnership, common law or business trust, etc.)	
Tirst organized, formed or incorporated under the laws of FLORIDA (Finer state, or if a non LIS, entiry, the name of the country)	
(Enter state, or if a non-U.S. entity, the name of the country)	
on 04/10/2018	
Enter date "Converting Entity" was first organized, formed or incorporated.	
KOKOTIKO TRANSPORT, INC. Enter Name of Florida Profit Corporation	
4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.	
5. If not effective on the date of filing, enter the effective date: 12/01/2020. (The effective date: Connect by prior to nor more than 90 days after the date this document is filed by the Florid	
Department of State.)	ä
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.	
2 <u>:</u> 22	
2026 DEC	

Signed this 30TH day of NOVEMB	ER	<u>_</u> .
Required Signature for Florida Profit Corporation	on:	
Signature of Director, Officer, or, if Directors or Of CARLOS A MARTINEZ OTERO Title:		orporator:
Required Signature(s) on behalf of Converting F companies: [See below for required signature(s).]	lorida partnerships, limited partn	
Signature: CARLOS A MARTINEZ OTER Signature: Representation of the Bare Signature: CARLOS A MARTINEZ OTER Signature: Representation of the Bare Signature of the Bare Signatur	O Title: MGR	
Signature: Ach Bar hull-		
Printed Name: RICHARD BATISTA MALDONADO	_{Title:} <u>AP</u>	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
If Florida General Partnership or Limited Liabi Signature of one General Partner.	lity Partnership:	
If Florida Limited Partnership or Limited Liabil Signatures of <u>ALL</u> General Partners.	lity Limited Partnership:	
If Florida Limited Liability Company: Signature of a Member or Authorized Representative	ve.	2020 OEC
All others: Signature of an authorized person.		- 7
Fees: Articles of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	PH 6: 02

ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I	the corporation shall be: KOKOTIK	O TRANS	SPORT, INC.
ARTICLE I			
•	Principal street address	00.000	Mailing address, if different is:
KISSIN	MMEE, FL 34741	OR	LANDO, FL 32877
The purpose	III PURPOSE for which the corporation is organized is: AND ALL LAWFUL PU	IRPOSE	
ARTICLE I	IV SHARES of stock is:		
The number of	of shares of stock is: 100 V OFFICERS AND/OR DIRECTORS	<u>S</u>	
The number of	OFFICERS AND/OR DIRECTORS CARLOS A MARTINEZ OTERO: PRESIDENT	S Name and Title	
The number of ARTICLE Name and T	OFFICERS AND/OR DIRECTORS CARLOS A MARTINEZ OTERO: PRESIDENT		RICHARD BATISTA MALDONADO; SECRETARY 225 E TROPICANA CT
The number of ARTICLE Name and T	of shares of stock is:	_ Name and Title	225 E TROPICANA CT KISSIMMEE, FL 34741
The number of ARTICLE Name and To Address:	V OFFICERS AND/OR DIRECTORS CARLOS A MARTINEZ OTERO; PRESIDENT 225 E TROPICANA CT	_ Name and Title _ Address:	225 E TROPICANA CT KISSIMMEE, FL 34741
The number of ARTICLE Name and To Address:	V OFFICERS AND/OR DIRECTORS CARLOS A MARTINEZ OTERO; PRESIDENT 225 E TROPICANA CT KISSIMMEE, FL 34741	Name and Title Address: Name and Title	225 E TROPICANA CT KISSIMMEE, FL 34741
The number of ARTICLE Name and T Address: Name and T Address:	V OFFICERS AND/OR DIRECTORS CARLOS A MARTINEZ OTERO; PRESIDENT 225 E TROPICANA CT KISSIMMEE, FL 34741	Name and Title Address: Name and Title Address:	225 E TROPICANA CT KISSIMMEE, FL 34741
The number of ARTICLE Name and T Address: Name and T Address:	V OFFICERS AND/OR DIRECTORS CARLOS A MARTINEZ OTERO; PRESIDENT 225 E TROPICANA CT KISSIMMEE, FL 34741	Name and Title Address: Name and Title Address:	225 E TROPICANA CT KISSIMMEE, FL 34741

ARTICL	E VI REGISTERED AGENT and Florida street address (P.O. Box NOT acceptab	(a) of the registered agent is:
The <u>name</u>		of the registered agent is.
Name:	CARLOS A MARTINEZ OTERO	
Address:	225 E TROPICANA CT	
	KISSIMMEE, FL 34741	
	***	*******
********* Having b this certif	een named as registered agent to accept service of pro ficate, I am familiar with and accept the appointment of	cess for the above stated corporation at the place designated in s registered agent and agree to act in this capacity
\cap	alor A North	11/30/2020

7020 DEC -7 PH 6: 02

Date