P2 1000051352

(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:
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SECGLIARY OF STATE TALLAHASSEF, FLORIDA

01:8 HV & IND 1212

Letter Number: 421A00012950

June 11, 2021

OLEH STOVYNOHA O.S.V. TRUCKING INC 5097 SAN LUIS TERRACE NORTH PORT, FL 34286

SUBJECT: OSV TRUCKING INC Ref. Number: W21000085183

We have received your document for OSV TRUCKING INC and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Conversion must be sign on behalf of other busisess enity.,

Please return the corrected original and one copy of 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.

Tyrone Scott Regulatory Specialist II New Filings Section

COVER LETTER

Tallahassee, Fl. 32314

TO: New Filing Section Division of Corporations	•	1			
SUBJECT: O.S.V. TRUCKING	G INC				
Name of	Resulting Florida	Profit	Corporation		
The enclosed Articles of Conversion, Articles of entity into a "Florida Profit Corporation" in account	f Incorporation, a ordance with ss. (nd fees 507-119	are submitted to convert the following eligible 33 & 607.0202, F.S.	c	
Please return all correspondence concerning this	matter to:				
OLEH STOVYNOHA					
Contact Person		-			
O.S.V. TRUCKING INC					
Firm/Company		_			
5097 SAN LUIS TERRACE		_			
Address					
NORTH PORT, FL 34286		_			
City, State and Zip Code	•	,			
oleg.stavynoha@gmail.com		_			
E-mail address: (to be used for future annu-	al report notifica	tion)			
For further information concerning this matter, p					
OLEH STOVYNOHA	_at (<u>267</u>	J	3-5877		
Name of Contact Person	Area C	o de and	I Daytime Telephone Number		
Enclosed is a check for the following amount:					
■ \$105,00 Filing Fees □\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filin and Certified Co	~	□\$122.50 Filing Fees, Certified Copy, and Certificate of Status		
Mailing Address:			Address: Filing Section		
New Filing Section Division of Corporations			on of Corporations		
			The Centre of Tallahassee		

The Centre of Tallahassee 2415 N. Monroe Street, Suite \$10

Tallahassee, Fil. 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

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is: O.S.V. TRUCKING INC	:		
Enter Name of the Converting Entity			
2. The converting entity is a CORPORATION			
general partnership, common law or business trust, etc.)			
first organized, formed or incorporated under the laws of PENNSYLVANIA (Enter state, or if a pop-U.S. entity, the name of the country)			
(Enter state, or if a non-U.S. entity, the name of the country)			
on 06/30/2016			
Enter date "Converting Entity" was first organized, formed or incorporated.			
O.S.V. TRUCKING INC Enter Name of Florida Profit Corporation 4. This conversion was approved by the eligible converting entity in accordance with this chapter and	I the lav	ws of it	s
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 filing Department of State.)	iled by	the Flo	orida
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this listed as the document's effective date on the Department of State's records	s date v	vill not	be
HE NIA OSC	SECRETARY YRATER	2121 JUN 18	

Signed this 25	_day of MAY	<u></u>	. 20 21	
Required Signature for	r Morida Profit Corporatio			
Signature of Arector, (2)	Those of A Urectors or Off	icers have not been s	elected, an Incorporator	
Printed Name: OLEH	STOVYNOHA	RESIDENT		
Required Signature(s)	on behalf of Converting Fl	orida partnerships,	limited partnerships, and	<u> Llimited liabi</u>
Signature /			·	
Printed Name	<i></i>	Title:	<u></u>	
Signature:				
Printed Name:		Title:		
Signature.				
Printed Name:		Title:		
Signature:	-			
Printed Name		Title ⁻	···	
Signature:				
Printed Name:		Title:		
Signature:				
Printed Name		Title:		
	tnership or Limited Liabili	•		
If Florida Limited Part Signatures of ALL Gene	nership or Limited Liabili ral Partners.	ty Limited Partner	.bip:	
If Florida Limited Liab Signature of a Member of	oility Company: or Authorized Representative	•		
All others: Signature of an authorize	ed person.			
Fees:				
Articles of Conv Fees for Florida	ersion; Articles of Incorporation:	\$35.00 \$70.00		
Certified Copy: Certificate of Sta	·	\$8.75 (Optional \$8.75 (Optional		

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

The name of the corporation shall be O.S.V. TRUCKING INC ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Mailing address, if different is Principal street address SAME___ 5097 SAN LUIS TERRACE NORTH PORT, FL 34286 ARTICLE III PURPOSE The purpose for which the corporation is organized is: LONG-DISTANCE TRUCKING ARTICLE IV SHARES The number of shares of stock is: 100 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Trile OLEH STOVYNOHA, PRSIDENT Name and Title 5097 SAN LUIS TERRACE Address Address NORTH PORT, FL 34286 Name and Title: Name and Title:____ Address. Address. Name and Title: _____ Name and Title: Address. Address

ARTICL The name	E VI REGISTERED AGENT and Florida street address (P.O. Box NO	T acceptable) of the registered agent is
Name.	OLEH STOVYNOHA	
Address.	5097 SAN LUIS TERRACE	
	NORTH PORT, FL 34286	.
Having be	en named as registered agent to accept sericate. I am familiar with grid accept the app	rvices of process for the above stated corporation at the place designated in wintment as registered agent and agree to act in this capacity 05/25/2021
	Requirer Signature/Registered Agent	Date