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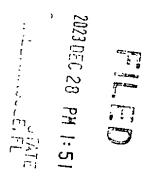
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600420921426

12/28/23--01028--012 **105.00



COVER LETTER

New Filing Section Division of Corporations

TO:

SUBJECT: BAYO	U AUTO REC	ON LLC				
		Resulting Flori	da Profit	Corporation		
The enclosed Articles of entity into a "Florida P	of Conversion, Articles of rofit Corporation" in acc	of Incorporation cordance with ss	and fees	s are submitted to convert the follo	wing el	igible
Please return all corres	pondence concerning thi	s matter to:				
JOHN GAVR	IAN					
•	Contact Person					
BAYOU AUT	O RECON LLO					
	Firm/Company					
20669 LONG	LEAF PINE A	√E.				
	Address	· · · · · · · · · · · · · · · · · · ·				
TAMPA, FL 3	3647					
	City, State and Zip Cod	e				
jgavrian@iclo						
E-mail address: (t	to be used for future ann	ual report notifi	cation)			
	concerning this matter,					
JOHN GAVR	IAN	_ _{at (} 813	267	7-7136		
Name of Co	ontact Person		Code and	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 Fil and Certified (□\$122.50 Filing Fees, Certified Copy, and Certificate of Status	2023 DEC	
Mailing Addr New Filing So Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7		New F Divisi The C 2415 N	Address: Siling Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	28 PM 1:51	

Articles of Conversion

For

Converting Eligible Entity

Into

Florida Profit Corporation

Enter Name of the Converting Entity

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:

110

BAYOU AUTO RECON LLC

2. The converting 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 FLORIDA (Enter state, or if a non-U.S. entity, the name of the country)
first organized, formed or incorporated under the laws of
(Enter state, or if a non-o.s. entry, the name of the country)
on SEPTEMBER 13, 2023
Enter date "Converting Entity" was first organized, formed or incorporated.
3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> : BAYOU AUTO RECON LLC Enter Name of Florida Profit Corporation
Enter Name of Florida From 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: September 13, 2023
(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida
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.
•

Signed this 13 day of DECEMBER			
Required Signature for Florida Profit Corporation:	į		
Signature of Director, Officer, or, if Directors or Office	ers have not been selected, an Incorporator	:	
Printed Name: JOHN GAVRIAN Title: PAF	RTNER		
Required Signature(s) on behalf of Converting Flor companies: [See below for required Signature(s).]	ida partnerships, limited partnerships, a	ınd limited liab	<u>ility</u>
Signature:		_	
Printed Name: JOHN GAVRIAN	Title: PARTNER	_	
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.		202	
All others: Signature of an authorized person.		2023 DEC 21	
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)	8 PH 1:51	

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

	II PRINCIPAL OFFICE al place of business/mailing address is:		
Principal street address		Mailing address, if different is:	
CLEAF	RWATER, FL 33764		
The purpos	e for which the corporation is organized is: RAL PARTNERSHIP		-
			_
ARTICLE The number	TIV SHARES of stock is:		
The number	of shares of stock is: V OFFICERS AND/OR DIRECTORS		
The number ARTICLE	v of shares of stock is: V OFFICERS AND/OR DIRECTORS Title: JOHN GAVRIAN, PARTNER	Name and Title:	
The number ARTICLE Name and	of shares of stock is: V OFFICERS AND/OR DIRECTORS		
The number ARTICLE Name and	v of shares of stock is: V OFFICERS AND/OR DIRECTORS Title: JOHN GAVRIAN, PARTNER	Name and Title:	
The number ARTICLE Name and The Address:	V OFFICERS AND/OR DIRECTORS Title: JOHN GAVRIAN, PARTNER 20669 LONGLEAF PINE AVE TAMPA, FL 33647	Name and Title: Address: Name and Title:	
The number ARTICLE Name and The state of t	V OFFICERS AND/OR DIRECTORS Title: JOHN GAVRIAN, PARTNER 20669 LONGLEAF PINE AVE TAMPA, FL 33647	Name and Title: Name and Title:	
The number ARTICLE Name and The state of t	V OFFICERS AND/OR DIRECTORS Title: JOHN GAVRIAN, PARTNER 20669 LONGLEAF PINE AVE TAMPA, FL 33647 Title: JORGE CABRERA, PARTNER	Name and Title: Address: Name and Title: Address:	<u> </u>
The number ARTICLE Name and 1 Address: Name and 1 Address:	Title: JORGE CABRERA, PARTNER 1801 NORTHWOOD DR CLEARWATER, 100 V OFFICERS AND/OR DIRECTORS AND/OR DIRECTORS DIRECTORS DIRECTORS AND/OR DIRECTORS DIRECTORS AND/OR DIRECTORS	Name and Title: Address: Name and Title: Address: Co	
The number ARTICLE Name and 1 Address: Name and 1 Address:	Title: JORGE CABRERA, PARTNER JORGE CABRERA, PARTNER 1801 NORTHWOOD DR	Name and Title: Address: Name and Title: Address:	<u> </u>

<u>ARTICL</u>	<u>E VI REGISTERED AGENT</u>		
The <u>name</u>	and Florida street address (P.O. Box NOT acceptab	e) of the registered agent is:	
Name:	JOHN GAVRIAN		
Address:	20669 LONGLEAF PINE AVE		
	TAMPA, FL 33647		
Having be this certifi	en named as registered agent to accept service of proceedings. I am familiar with and accept the appointment a	ess for the above stated corporation at the place de registered agent and agree to act in this capacity	signated ir
		12/13/23	
	Required Signature/Registered Agent	Date	

EILED 2023 DEC 28 PM 1:51