05

(Requestor's Name)  (Address)  (Address)	200062243542
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)	:2/19/0501043003 <b>**150.00</b>
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:  IM19  Common Number)	PHED 050EC 19 MID: 29 TALLAGAS LINGS

M. HODGES

# **COVER LETTER**

TO: Registration Se Division of Con		
SUBJECT:	NAGEL FAR	HOLDINGS LLC (Liability Company)
The enclosed Articles of	f Organization and fee(s) are su	bmitted for filing.
Please return all corresp	ondence concerning this matte	r to the following:
	JACK	NA 6-15 L- Vame of Person)
	NAGEL F	FAMILY HOLDINGS LL C
	.,	BER FALLS LAME
		T3c 好・FL・ 33Y37 State and Zip Code)
<del></del>	(City)	State and Zip Code)
For further information	concerning this matter, please	call:
JACK	NAGEL	at (561) 733 - 473 4  (Area Code & Daytime Telephone Number)
(Name	of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for	or the following amount:	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed)  S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 20, 2005

JACK NAGEL NAGEL FAMILY HOLDINGS LLC 7263 AMBER FALLS LANE BOYNTON BEACH, FL 33437

SUBJECT: NAGEL FAMILY HOLDINGS LLC

Ref. Number: W05000055759

We have received your document for NAGEL FAMILY HOLDINGS LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on December 19, 2005. Please amend your document accordingly.

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) 245-6967.

Letter Number: 905A00072821

Michelle Hodges Document Specialist

## CERTIFICATE OF CONVERSION

Pursuant to section 608.439, Florida Statutes, the following unincorporated business entity hereby submits the <u>attached articles of organization</u> and this certificate of conversion to convert to a Florida limited liability company:

FIRST: Tb	e name of the unincorporated business immediately prior to filing this document was:
·	NAGEL FAMILY HOLDINGS LLC.
	The date on which and the jurisdiction in which the unincorporated business was first
created or o	therwise came into being are:
A.	Date: Oct-1st 1998  Jurisdiction: NEW JERSEY
B.	Jurisdiction: NEW JERSEY
C.	If different from the above noted jurisdiction, the jurisdiction immediately prior to
	its conversion:
	ne name of the limited liability company as set forth in the attached articles of
organizatio	ı is:
	NOCE FAMILY 11. + 146
<del></del>	NAGEL FAMILY HOLDINGS.
	and they
	Signature of a Member or an Authorized Representative of a Member
	(In accordance with section 608.408(3), Florida Statutes, the execution of this document
	constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
	JACK NAGEL ES S
	Typed or Printed Name of Signee
	Typot of a finance function of preprior
	$\mathcal{G}_{\mathcal{F}}^{\mathcal{F}}$
	FILING PEES:  \$160.00 Filing Fee for Articles of Organization  \$ 25.00 Filing Fee for Registered Agent Designation  \$ 25.00 Filing Fee for Certificate of Conversion
	\$100.00 Filing Fee for Articles of Organization
	\$ 25.00 Filing Fee for Registered Agent Designation
	S 25.00 Filing Fee for Certificate of Conversion
	3 30.00 Certified Cupy (optional)
	3 5.00 Certificate of Status (antional)

(Note: Section 688.439, F.S., does not provide for a corporation to convert to a limited limitity company.)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NAGEL FAM	1LY HOLDINGS L C ed Company" or their abbreviation "LLC," or "L.C.,")
(Must end with the words "Limited Liability Company, "Limit	ed Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7263 AMBER FALLS LANE	7263 AMBER FALLS LAIVE BOYNTON BOH. FL. 33437
BOYNTON B.H. FL. 33437	BOYNTON BOH. FL. 33437
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	d Office, & Registered Agent's Signature:
The name and the Florida street address of the	
JACK 1	VAGEL E D
Name	
7263 AMBE	e FALLS LANE dress (P.O. Box NOT acceptable)
BOYNTON BeH. City, State,	FL 33437
City, State,	առ ուն
Having been named as registered agent and to	accept service of process for the above stated limited

liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

Title:	Name and Address:
"MGR" = Manager "MGRM" = Manager	
	* <del>-</del>
MGRM	JACK NAGEL
	JALK NAGEL 7263 AMRER FALLS BOYNTON BCH. FL. 33437
MORM	ANNETTA T. NAGEL
	BOYNTON BOW. PL- 33437
H GRM	ROSALIE C. PIHLGREM
	ROSALIE C. PIHLGREM 47 FIFER LANE LEXINGTON MA. 02420
	CEXING SH MA. BZ4Z
MGRM	DEMISE H. ELYAHOW
	TEMISE M. ELYAHOW 45 CEDAR ST. LEXINGTON MA. 02420
(Use attachment if	
LE V: Effective da	ate, if other than the date of filing: 13 605
#P25 31-2- P. 35-2	ed, the date must be specific and cannot be more than five business da
	te of filing.)
	<b>u</b> ,
days after the dat	
) days after the dat	
0 days after the dat  REQUIRED SIG	NATURE:
days after the dat  REQUIRED SIG	Signature of a member or an authorized representative of a member.  (In accordance with section 608.408(3), Florida Statutes, the execution
days after the dat  REQUIRED SIG	Signature of a member or an authorized representative of a member.
days after the dat  REQUIRED SIG	Signature of a member or an authorized representative of a member.  (In accordance with section 608.408(3), Florida Stantes, the execution of this document constitutes an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)