1990098669

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
— , — —
(Business Entity Name)
(======= = ,,
(Document Number)
Certified Copies GG Certificates of Status
Special Instructions to Filing Officer:
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, -
W09000043995

Office Use Only



000160359410

10/01/09--01008--020 **150.00

FILED 09 OCT 12 AM II: 02 TALLAHASSEE, FLORIDA

D. BRUCE
OCT 13 2009
EXAMINER

COVER LETTER

TO:	Registration S Division of Co				
SUBJ	ECT: NIP R		Florida Limited Company)		B .
conve		siness Entity" into a "	ticles of Organization, Florida Limited Liabil	and fees are submitted ity Company" in	to
Please	return all corre	espondence concerning	g this matter to:		
Kara N	McIntire	·	·		
Stodda	ard L. Smith, P.A.				TALL SEC
49 Ple	asant Street	(Firm/Company)			AHASSI
Bruns	wick, ME 04011	(Address)			
<u></u>		City, State and Zip Code)	· · · · · · · ·		OF STATE
For fu	orther information	on concerning this ma	tter, please call:		
Kara N	McIntire		at (207) 721-	0622	_
	(Name of Conta	ct Person)	(Area Code and Da	aytime Telephone Number)	
Enclo	sed is a check f	or the following amou	int:		
(\$25 fo & \$125	0.00 Filing Fees or Conversion 5 for Articles anization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Regist Divisi Clifto 2661	EET ADDRESS tration Section ion of Corporati in Building Executive Center nassee, FL 3230	ions er Circle	MAILING A Registration Division of C P. O. Box 63 Tallahassee,	Section Corporations 27	

09 OCT 12 AM II: 02



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 2, 2009

KARA MCINTIRE 49 PLEASANT STREET BRUNSWICK, ME 04011

SUBJECT: NIP REALTY, LLC Ref. Number: W09000043995

09 OCT 12 AHII: 02
SECRETARY OF STATE

We have received your document for NIP REALTY, 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):

Sections 607.1113, 608.4403, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by a member or an authorized representative of a member. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 709A00031994

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

2. The "Other Business Entity" is a limited liability company	
(Enter entity type. Example: corporation, limited partnership,	
general partnership, common law or business trust, etc.)	
first organized, formed or incorporated under the laws of Maine	09 0CT 高端 120 0CT
(Enter state, or if a non-U.S. entity, the name of the country)	(A)
on 07/09/2008	유
(Enter date "Other Business Entity" was first organized, formed or incorporation	(g) =
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:	7F. 02
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:	_ ∙
NIP Realty, LLC	
(Enter Name of Florida Limited Liability Company)	
5. If not effective on the date of filing, enter the effective date:	·

Signed this 16th day of September	20 <u>09</u>
Signature of Member or Authorized Representa	tive of Limited Liability Company:
Signature of Member or Authorized Representative Printed Name: Joseph Penna	Joseph J. France
Signature(s) on behalf of Other Business Entity:	See below for required signature(s).]
Signature: Nococard Land	Title: Registerd Agent
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	
Signature:	
Printed Name:	Title:
Signature:	201.1
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	v Partnership: AHASSE
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	
All others: Signature of an authorized person.	IRIDA
Fees:	
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Comp		
NIP Realty, LLC		<u> </u>
(Must end with the words "Limited Liability Compar" "LLC.")	y," the abbreviation "L.L.C.," or the design	nation
ARTICLE II - Address:		
The mailing address and street address of	of the principal office of the Lim	ited
Liability Company is:		
Principal Office Address:	Mailing Address:	
2205 Highway A1A Unit 501	361 Seaside Avenue	
Indian Harbour Beach, FL 32937		
ARTICLE III - Registered Agent, Re	saco, ME 04072 gistered Office, & Registered A	B .gent's
ARTICLE III - Registered Agent, Resignature: (The Limited Liability Company cannot serve as its of	gistered Office, & Registered A	
ARTICLE III - Registered Agent, Resignature:	gistered Office, & Registered A	an The control of the
ARTICLE III - Registered Agent, Resignature: (The Limited Liability Company cannot serve as its cindividual or another	gistered Office, & Registered A	an 55.
ARTICLE III - Registered Agent, Resignature: (The Limited Liability Company cannot serve as its cindividual or another business entity with an active Florida registration.)	gistered Office, & Registered A	
ARTICLE III - Registered Agent, Resignature: (The Limited Liability Company cannot serve as its of individual or another business entity with an active Florida registration.) The name and the Florida street address	gistered Office, & Registered A	09 OCT 12 SECKETARY TALLAHASSEE
ARTICLE III - Registered Agent, Resignature: (The Limited Liability Company cannot serve as its of individual or another business entity with an active Florida registration.) The name and the Florida street address	gistered Office, & Registered A	09 OCT 12 AH SECNETARY OF TALLAHASSEE, F
ARTICLE III - Registered Agent, Resignature: (The Limited Liability Company cannot serve as its dindividual or another business entity with an active Florida registration.) The name and the Florida street address Sonia M. Pawluc 171 SE 5th Street	gistered Office, & Registered A	O9 OCT 12 AH II:
ARTICLE III - Registered Agent, Resignature: (The Limited Liability Company cannot serve as its dindividual or another business entity with an active Florida registration.) The name and the Florida street address Sonia M. Pawluc 171 SE 5th Street	gistered Office, & Registered A own Registered Agent. You must designate of the registered agent are: Name	09 OCT 12 AH SECNETARY OF TALLAHASSEE, F

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

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Joseph Penna 361 Seaside Avenue Saco. ME 04072 Demitroula Kouzounas MGRM 361 Seaside Avenue Saco, ME 04072 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Conversion, if an effective date is listed therein.) REQUIRED SIGNATURE: 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.) Joseph Penna Typed or printed name of signee 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) Page 2 of 2