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





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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T Server MARIL 1 2015

COVER LETTER

TO:	Registration S Division of Co					
SUBJ	ECT: Nagar I	nvestments, LLC				
		(Name	of Res	sulting Florida	Limited	d Company)
						d fees are submitted to convert an "Other ecordance with s. 605.1045, F.S.
Please	return all corre	espondence concerning	g this	matter to:		
Kath	een M. Moore					
		(Contact Person)				
Law	Offices of Kath	nleen M. Moore				
	<u>.</u>	(Firm/Company)				
351 \$	S. Cypress Ro	ad, Suite 404B				
		(Address)				
Pom	oano Beach, F	1 33060				
	((City, State and Zip Code)				
	ore@kmoorela					
E-r	nail Address: (to b	e used for future annual re	port n	otifications)		
For fu	rther information	on concerning this ma	tter, p	olease call:		
Kath	een M Moore		at (954	366-	3694
	(Name of Conta	ct Person)		(Area Code)	(Day	time Telephone Number)
Enclo	sed is a check f	or the following amou	ınt:			
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles unization)	□\$155.00 Filing Fees and Certificate of Status		1180.00 Filing) Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STRE	EET ADDRESS	S:		MAILI	NG A	DDRESS:
_	tration Section			Registra		
	on of Corporati	ions		Division P. O. Bo		orporations
	n Building Executive Cent	er Circle				27 FL 32314
	iassee, FL 3230			i aiiaiia	anee, I	. 2. 2. 2. 1.

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Busine Nagar Investments, LLC	ess Entity" immediately prior to the filing of the Articles	FB on
(15	nter Name of Other Business Entity)	
2. The "Other Business Entity" is	limited liability company	B 24 MASSE
·	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	F.F.S
First organized, formed or incorne	orated under the laws of Michigan	ORI F
on June 21, 2002 (date of organization, formation or in	(Enter state, or if a non-U.S. entity, the na	me of the country)
3. The name of the Florida Limite	ed Liability Company as set forth in the attached Article	es of Organization:
Nagar Investments, LLC		
(Enter Nam	e of Florida Limited Liability Company)	
date this document is filed by the	iling, enter the effective date: e prior to date of receipt or filed date nor more than 9 e Florida Department of State; <u>AND</u> 2) must be the sa es of Organization, if an effective date is listed therein	ame as the effective
5. The plan of conversion has been	a approved in accordance with all applicable statutes.	

Page 1 of 2

Signed this 18th day of February	20 <u>15</u>	
Signature of Authorized Representative		
Signature of Authorized Representative: _	MAhu Non	
Printed Name: Vidhu Nagar	Title: Manager	
	Entity: [See below for required signature(s).]	
Signature: /r / / / / / / / / / / / / / / / / / /	Title: Manager	
Timed Name.	The state of the s	
Signature:	m: I	
Printed Name:	Title:	
Signature:		,
Printed Name:	Title:	<u>^</u> ≈ 3
		AHA BB3
Printed Name:	Title:	د دؤ
Signature:	Tul	
Printed Name:	Title:	PH 4:57
Signature:		65 F. 53
Printed Name:	Title:	
If Florida Corporation:		
Signature of Chairman, Vice Chairman, Dire	ector, or Officer.	
If Directors or Officers have not been selected	ed, an Incorporator must sign.	
If Florida Conoral Portnership or Limited	d Liability Dautnauchins	
If Florida General Partnership or Limited Signature of one General Partner.	a Liamity Partnersing.	
If Florida Limited Partnership or Limited	d Liability Limited Partnership:	
Signatures of <u>ALL</u> General Partners.		

All others: Signature of an authorized person.

Fees:

Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Nagar Investments,, LLC			
(Must end with the words "Limi	ted Liability Company, "L.L.C.," or "LLC	C.")	
ARTICLE II - Address: The mailing address and street address of the principa	al office of the Limited Liability Company	y is:	
Principal Office Address:	Mailing Address:		
1200 Hibiscus Avenue, Apt. 1703 Pompano Beach, Fl 33062	1200 Hibiscus Avenue, Apt. 170 Pompano Beach, Fl 33062	<u>03</u>	
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its or another business entity with an active Florida registra The name and the Florida street address of the registe Vidhu Nagar Na 1200 Hibiscus Avenue, Ap Florida street address (P.O. I) Pompano Beach City Having been named as registered agent and to accept the place designated in this certificate, I hereby acceptainty. I further agree to comply with the provision	wn Registered Agent. You must designate ation.) red agent are: tt. 1703 Box NOT acceptable) FL 33062 Zip I service of process for the above stated lim cept the appointment as registered agent a	SECRETARY OF STATE. Inited liability company at and agree to act in this	

of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Tit <u>le:</u>	Name and Address:
'AMBR" = Authorized Member	
MGR" = Manager	
MGR	Vidhu Nagar
•	1200 Hibisucs Avenue, Apt. 1703
	Pompano Beach, Fl 33062
	
	
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EV: Effective date, if other than the dat ctive date is listed, the date must be sp	e of filing:
EV: Effective date, if other than the dat ctive date is listed, the date must be spraining.)	e of filing:
Use attachment if necessary) EV: Effective date, if other than the date ctive date is listed, the date must be spring.) EVI: Other provisions, if any. REQUIRED SIGNATURE:	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 9
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CV: Effective date, if other than the date extive date is listed, the date must be splitling.) CVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 6	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 9 May Lagran member or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document
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