

L16000049413

(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:

07016

Office Use Only

W16-006995



200280641352

01/22/16--01011--028 \*\*210.00

FILED  
SECRETARY OF STATE  
MISSISSIPPI CORPORATIONS  
16 MAR 11 AM 8:46

03/14/16



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 1, 2016

MICHAEL D. TANNENBAUM  
2161 PALM BEACH LAKES BLVD.  
STE. 304  
W. PALM BEACH, FL 33409

SUBJECT: NELMARTA ASSOCIATES, LLC  
Ref. Number: W16000006995

We have received your document for NELMARTA ASSOCIATES, LLC and your check(s) totaling \$210.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

If you have any further questions concerning your document, please call (850) 245-6052.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 216A00002133

RECEIVED  
FEB 11 2016  
16:00:11 PM  
16000006995

**MICHAEL D. TANNENBAUM**

*Attorney at Law*

2161 PALM BEACH LAKES BLVD.  
SUITE 304  
WEST PALM BEACH, FLORIDA 33409

WWW.MDTLAWOFFICE.COM

TELEPHONE (561) 471-1406

FAX (561) 683-7551

December 29, 2015

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: Nelmart Associates, Ltd./Nelmarta Associates, LLC**

Dear Sir or Madam:

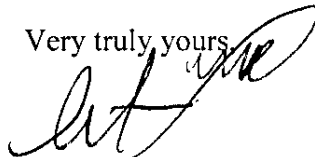
Enclosed please find the following documents:

1. Original and one copy of the Articles of Conversion for "Other Business Entity" into Florida Limited Liability Company.
2. Original and one copy of Articles of Organization for Florida Limited Liability Company.
3. Check in the amount of \$210.00 for the filing fees (\$25.00 for Articles of Conversion and \$125.00 for Articles of Organization) and certified copies (\$30.00 each for Item Nos. 1 and 2 above).

Kindly file the above documents and return the certified copies in the envelope provided.

Thank you for your cooperation in this matter. If you have any questions, please contact me.

Very truly yours,



MICHAEL D. TANNENBAUM

MDT/pr  
Enclosures

**Articles of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Limited Liability Company**

The Articles 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.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  
NELMARTA ASSOCIATES, LTD.

(A03-000117) (Enter Name of Other Business Entity)

2. The "Other Business Entity" is a LIMITED PARTNERSHIP  
(Enter entity type. Example: corporation, limited partnership,  
general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of FLORIDA  
on JANUARY 23, 2003 ✓ (Enter state, or if a non-U.S. entity, the name of the country)  
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:  
NELMARTA ASSOCIATES, LLC  
(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: \_\_\_\_\_  
(The effective date: 1) cannot be prior to date of receipt or filed date 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 Articles of Organization, if an effective date is listed therein.)

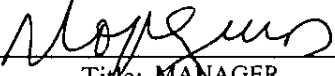
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

5. The plan of conversion has been approved in accordance with all applicable statutes.


FILED  
SECRETARY OF STATE  
DEPT. OF STATE  
1516211 AM 8:45

Signed this 15th day of December 2015.

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative:   
Printed Name: NELSON LOPEZ Title: MANAGER

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature:   
Printed Name: NELSON LOPEZ Title: GENERAL PARTNER

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida Corporation:**

Signature of Chairman, Vice Chairman, Director, or Officer.  
If Directors or Officers have not been selected, an Incorporator must sign.

**If Florida General Partnership or Limited Liability Partnership:**

Signature of one General Partner.

**If Florida Limited Partnership or Limited Liability Limited Partnership:**

Signatures of ALL General Partners.

**All others:**

Signature of an authorized person.

**Fees:**

|                                            |                    |
|--------------------------------------------|--------------------|
| Articles of Conversion:                    | \$25.00            |
| Fees for Florida Articles of Organization: | \$125.00           |
| Certified Copy:                            | \$30.00 (Optional) |
| Certificate of Status:                     | \$5.00 (Optional)  |

FILED  
CLERK OF STATE  
OFFICE OF CORPORATIONS  
16 DEC 17 PM 8:16

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

NELMARTA ASSOCIATES, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

### Principal Office Address:

4855 HUNTERS WAY  
BOCA RATON, FL 33434

### Mailing Address:

4855 HUNTERS WAY  
BOCA RATON, FL 33434

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

NELSON LOPEZ

Name

4855 HUNTERS WAY

Florida street address (P.O. Box **NOT** acceptable)

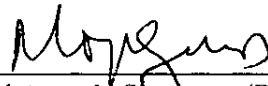
BOCA RATON

FL 33434

City

Zip

*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 605, F.S..*



Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED  
STATE OF FLORIDA  
TALLAHASSEE  
15 MAR 11 AM 8:16

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

NELSON LOPEZ

4855 HUNTERS WAY

BOCA RATON, FL 33434

MGR

CARMEN M. LOPEZ

4855 HUNTERS WAY

BOCA RATON, FL 33434

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

**(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)**

**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.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

 12/15/15  
**Signature of a member or an authorized representative of a member.**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
I am aware that any false information submitted in a document to the Department of State  
constitutes a third degree felony as provided for in s.817.155, F.S.

AUTHORIZED MEMBER

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)**

FILED  
DEPT. OF STATE  
CORPORATE SERVICES  
15 DEC 17 PM 8:45