L18000037986

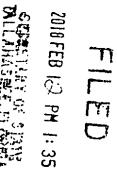
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



700308933027

02/12/18--01037--023 **150.00



FEB 1 4 2018

K Brumbley

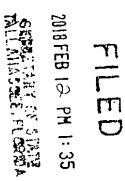
COVER LETTER

TO:	New Filing Se Division of C				
SHB.	JECT: NOSHA.	LLC			
5012	<u></u>	(Name of Res	ulting Florida Limite	d Com	npany)
					d fees are submitted to convert an "Othe coordance with s. 605.1045, F.S.
Pleas	e return all corre	espondence concerning	g this matter to:		
Julia (Greenberg-Aguilar				
		(Contact Person)			
MyU:	SAcorporation.com				
<u> </u>		(Firm/Company)			
1 Rad	lisson Plaza, Suite 8	800			
		(Address)			
New	Rochelle, NY 1080	I			
	((City, State and Zip Code)			
nick@	nosha.com				
E-	mail Address: (to b	e used for future annual re	port notifications)		
For f	urther informati	on concerning this ma	tter, please call:		
Julia	Greenberg-Aguilar		_at (330-2	
•	(Name of Conta	ect Person)	(Area Code)	(Day	time Telephone Number)
		or the following amou a bank located in the		rocess	sed by this office must be payable in US
(\$25 f	50.00 Filing Fees for Conversion 5 for Articles ganization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STR	EET ADDRES	S:	MAILI	NG A	ADDRESS:
	Filing Section		New Fi	_	
	sion of Corporat	ions	Divisio P. O. B		Corporations
	on Building Executive Cent	er			FL 32314

32301

Circle Tallahassee, FL

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 Business Entity" immediately prior to the filing of the Articles of Conversion is: NOSHA, LLC
(Enter Name of Other Business Entity)
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
on July 5, 2016 (date of organization, formation or incorporation) [Enter state, or if a non-U.S. entity, the name of the country)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization NOSHA, 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 calendar 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.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 31st day of January	_ 20_18
Signature of Authorized Representative of Limi	ted Lability Company:
Signature of Authorized Representative: Printed Name: NICHOLAS BORJA	Title: Member
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Mey	
Signature: Printed Name: NICHOLÁS BORJA	Title: Member
\mathcal{O}	
Signature: Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Optional)
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Comp	pany is:
NOSHA, LLC	
(Must contain the words "Limited	d Liability Company, "L.L.C.," or "L.L.C.,")
ARTICLE II - Address: The mailing address and street address o	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
11800 SW 59 AVE RD.	11800 SW 59 AVE RD.
MIAMI, FL 33156	MIAMI, FL 33156
The name and the Florida street address NICHOLAS BORJA	Name
	Name
11800 SW 59 AVE RD Florida street addre	ess (P.O. Box NOT acceptable)
MIAMI	FL 33156
City	Zip
liability company at the place desig registered agent and agree to act in thi statutes relating to the proper and co accept the obligations of my positio	nt and to accept service of process for the above stated limited mated in this certificate. I hereby accept the appointment as is capacity. I further agree to comply with the provisions of all mplete performance of my duties, and I am familiar with and on as registered agent as provided for in Chapter 605, F.S At a Signature (REQUIRED)

<u> Citle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
AMBR	NICHOLAS BORJA
	4057 MALAGA AVE.
	MIAMI, FL., 33133
	
LE V: Effective date, if other than the fective date is listed, the date must	the date of filing: . (OPTIONA st be specific and cannot be more than five business e of filing.)
fective date is listed, the date mu or 90 calendar days after the date	st be specific and cannot be more than five business e of filing.) t the applicable statutory filing requirements, this date will not be li
LE V: Effective date, if other than the fective date is listed, the date must or 90 calendar days after the date the date inserted in this block does not meet a effective date on the Department of State LE VI: Other provisions, if any.	st be specific and cannot be more than five business e of filing.) t the applicable statutory filing requirements, this date will not be lie's records.
LE V: Effective date, if other than the fective date is listed, the date must or 90 calendar days after the date the date inserted in this block does not meets effective date on the Department of State LE VI: Other provisions, if any. REQUIRED SIGNATURE:	st be specific and cannot be more than five business e of filing.) t the applicable statutory filing requirements, this date will not be lie's records.
LE V: Effective date, if other than the fective date is listed, the date must or 90 calendar days after the date me date inserted in this block does not mee is effective date on the Department of State. LE VI: Other provisions, if any. Signature of a membal This document is executed in I am aware that any false infor	st be specific and cannot be more than five business e of filing.) t the applicable statutory filing requirements, this date will not be lie's records.
LE V: Effective date, if other than the fective date is listed, the date must or 90 calendar days after the date and the date inserted in this block does not mee is effective date on the Department of State. LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memb This document is executed in I am aware that any false infor constitutes a third degree felor. NICHOLAS BORJA	st be specific and cannot be more than five business e of filing.) It the applicable statutory filing requirements, this date will not be lie's records. Deer or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. The mation submitted in a document to the Department of State my as provided for in s.817.155, F.S.
LE V: Effective date, if other than the fective date is listed, the date must or 90 calendar days after the date are date inserted in this block does not mee as effective date on the Department of State. LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memb This document is executed in I am aware that any false infor constitutes a third degree felor. NICHOLAS BORJA	st be specific and cannot be more than five business e of filing.) It the applicable statutory filing requirements, this date will not be lie's records. Der or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. rmation submitted in a document to the Department of State

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

ARTICLE IV-