# La1000275774

(F	Requestor's Name)	
(A	(ddress)	
(A	address)	
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(0	Ocument Number)	
Certified Copies	Certificates of S	Status
Special Instructions to	o Filing Officer:	

Office Use Only

Loc 6/14/21



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2021 APR 26 FD 5: 1

#### **COVER LETTER**

TO:	New Filing Section Division of Corporations			
SURI	TECT: NANA ALBUM LLC			
300	(Nar	ne of Resulting Florida	Limited Company)	
	nclosed Articles of Conversion ess Entity" into a "Florida Lin			
Please	e return all correspondence cor	nceming this matter	to:	
CARL	OS JOSE ALVAREZ			
	(Contact Perso	n)		
	(Firm/Compan	y)	<del>_</del> _	2021 APR
959 P/	ASEO CASTALLA			APR 26 APA equ
	(Address)			2 8
WEST	PALM BEACH, FL 33405		·	<del></del> .
CONG	(City, State and Zip SALOS@GMAIL.COM	Code)		 
E-m	nail Address: (to be used for future a	innual report notification	ns)	Ç.
For fu	rther information concerning (	this matter, please c	all:	
CARL	OS ALVAREZ	at (818	)912-0321	
	(Name of Contact Person)	(Area C	ode) (Daytime Telephone Nu	mber)
	sed is a check for the followin s and drawn on a bank located			e must be payable in US
(\$25 for & \$125	0.00 Filing Fees or Conversion for Articles nization)    3155.00 Filing and Certificate of Status			nd
	Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassce, FL 32314		Street Address: New Filing Section Division of Corporation The Centre of Tallaha 2415 N. Monroe Street Tallahassee, FL 32303	ssee et, Suite 810

## 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.

NAN	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
	(Enter Name of Other Business Entity)
2. 1	The "Other Business Entity" is a
	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First	t organized, formed or incorporated under the laws of
	(Enter state, or if a non-U.S. entity, the name of the country)
on 1	10/20/2016
(	(date of organization, formation or incorporation)
3. T	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
NAN	IA ALBUM LLC
-	(Enter Name of Florida Limited Liability Company)
4. If	f not effective on the date of filing, enter the effective date:
the e	e effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after date this document is filed by the Florida Department of State.)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
docur	
	he plan of conversion has been approved in accordance with all applicable statutes.

Signed this 15TH day of APRIL	20_31
Signature of Authorized Representative of Lim	nited Liability Company:
Signature of Authorized Representative: Printed Name: CARLOS ALVAREZ	Title: MANAGER
Signature(s) on behalf of Other Business Entity:	
Signature: Corby Jose Alvarez	Title: MANAGER
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

2021 APR 26 14:1 5:

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

NANA ALBUM LLC				
(Must contain the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the princ	ipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
939 Paseo Castalia	959 Paseo Castalla			
West Palm Beach, FL 33405	West Palm Beach, FL 33405			
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	ffice, & Registered Agent's Signature: stered Agent. You must designate an individual or another			
(The Limited Liability Company cannot serve as its own Registre	stered Agent. You must designate an individual or another	24 26 	2021	
(The Limited Liability Company cannot serve as its own Regi- business entity with an active Florida registration.)	stered Agent. You must designate an individual or another	# CLAP	2021 API	
(The Limited Liability Company cannot serve as its own Regi- business entity with an active Florida registration.)  The name and the Florida street address of the regi-	stered Agent. You must designate an individual or another	WELL ARASS	2021 APIc 26	
(The Limited Liability Company cannot serve as its own Regi- business entity with an active Florida registration.)  The name and the Florida street address of the regi-	stered Agent. You must designate an individual or another stered agent are:	WI APASS.	2021 APK 26 P	: 4
(The Limited Liability Company cannot serve as its own Regi- business entity with an active Florida registration.)  The name and the Florida street address of the regi- CARLOS JOSE ALVAI N  959 Pasco Castalla	stered Agent. You must designate an individual or another stered agent are:  REZ  ame  (P.O. Box NOT acceptable)	WITAPASS, A. A.	Ę	1 - 1
(The Limited Liability Company cannot serve as its own Registration.)  The name and the Florida street address of the registration.  CARLOS JOSE ALVAI  N  959 Pasco Castalla	stered Agent. You must designate an individual or another stered agent are:  REZ  ame	WITAHASS, TOO		

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)

Title:	Name and Address:			
"AMBR" = Authorized Member "MGR" = Manager MGR	CARLOS JOSE ALVAREZ			
MOK	959 Paseo Castalla			
	West Palm Beach, FL 33405			
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		-	TV.	
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		•	7.	
(Use attachment if necessary)				
ICLE V: Effective date, if other than the effective date is listed, the date must	ne date of filing: (OPTION be specific and cannot be more than five husiness days p	IAL) prior to o	r 90 cale	en:
after the date of filing.)				
after the date of filing.)  ICLE VI: Other provisions, if any.				
after the date of filing.)				
after the date of filing.)				

degree felony as provided for in s.817.155, F.S.)

### CARLOS JOSE ALVAREZ

Typed or printed name of signee

#### Filing Fees:



I, SHIRLEY N. WEBER, Ph.D., Secretary of State of the State of California, hereby certify:

Entity Name: NANA ALBUM LLC File Number: 201630110071

Registration Date: 10/20/2016

Entity Type: DOMESTIC LIMITED LIABILITY COMPANY

Jurisdiction: CALIFORNIA

Status: ACTIVE (GOOD STANDING)

As of April 14, 2021 (Certification Date), the entity is authorized to exercise all of its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the Certification Date and does not reflect documents that are pending review or other events that may affect status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of April 15, 2021.

SHIRLEY N. WEBER, Ph.D. Secretary of State

Certificate Verification Number: Y64MNVR

To verify the issuance of this Certificate, use the Certificate Verification Number above with the Secretary of State Certification Verification Search available at <u>behizfile.sos.ca.gov/certification/index</u>.