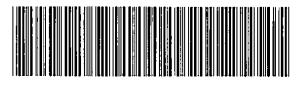
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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2021 DEC 29 PH 3: 36

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 12/29/2021	-		**WALK	<i>I</i>
NTITY NAME NACCOU	nting LLC			
OCUMENT NUMBER_				
	PLEASE FILE THE	E ATTACHED AND RETURN		
	Plain Copy			
	Certified Copy			
XXXXX	Certificate of Status			
	Certified Copy of Arts Certificate of Good Stan			
	APOSTILLE' / N	OTARIAL CERTIFICATION		
COUNTRY OF DESTINAT	TIDN			
NUMBER OF CERTIFICA	TES REQUESTED			
TOTAL OWED \$155		. ACCOUNT #: 120160000072	2	
		S 8 7/10		
DA AT.	/ / /	any issues or concerns. Thank you so		

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: NACCOUNTING, LLC			
	ulting Florida Limite	d Compa	ny)
The enclosed Articles of Conversion, Article Business Entity" into a "Florida Limited Lie	es of Organization	on, and f	ces are submitted to convert an "Other ordance with s. 605.1045, F.S.
Please return all correspondence concerning	this matter to:		
Allison Bazinet			
(Contact Person)			
Krevolin & Horst, LLC (Firm/Company)			
(Firm/Company) 1201 West Peachtree Street NW, Suite 3250			
(Address)			
,			
Atlanta, GA 30309		٠	
(City, State and Zip Code)			
MMarget@4L-Law.com			
E-mail Address: (to be used for future annual rep	oort notifications)		
For further information concerning this mat	ter, please call:		
Allison Bazinet	_at (404)	835-8053
(Name of Contact Person)	(Area Code)	(Daytin	835-8053 ne Telephone Number)
Enclosed is a check for the following amous dollars and drawn on a bank located in the t		rocessed	by this office must be payable in US
. 1 \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐S180.00 Filing and Certified Cop	y C	D\$185.00 Filing Fees. Pertified Copy, and Pertificate of Status
Mailing Address:		Street A	
New Filing Section			ing Section
Division of Corporations		DIVISION	of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

INHS11 (7/17)

P.O. Box 6327

Tallahassee, FL 32314

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 NACCOUNTING, LLC	; :
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a <u>limited liability company</u> M 2006 0 6 0 3 9 (8 (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust	212.1
First organized, formed or incorporated under the laws of	, etc.)
onApril 21, 2017 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization (Company) as set forth in the attached Articles of Organization (Company) as set forth in the attached Articles of Organization (Company) as set forth in the attached Articles of Organization (Company) as set forth in the attached Articles of Organization (Company) as set forth in the attached Articles of Organization (Company) as set forth in the attached Articles of Organization (Company) as set forth in the attached Articles of Organization (Company) as set forth in the attached Articles of Organization (Company) as set forth in the attached Articles of Organization (Company) as set forth in the attached Articles of Organization (Company) as set forth in the attached Articles of Organization (Company) as set forth in the attached Articles of Organization (Company) as set forth (Company) as set fort	on:
NACCOUNTING, LLC (Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date:	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days a the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a 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 amour	it to

which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.



Signed this 27 day of December	20 24 .
Signature of Authorized Representative of Limit	ed Liability Company:
Signature of Authorized Representative:	Hage President
Signature(s) on behalf of Other Business Entity: [5]	See below for required signature(s)
Signature: Marchael Marget Printed Name: Michael Marget	Title: President
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	_ Title:
Signature:Printed Name:	
Printed Name:	_ Tide:
Signature:Printed Name:	
Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Communication of Chairman, Vice	Officer
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL 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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
NACCOUNTING, LLC	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LI.C.")	

ARTICLE II - Address:

ARTICLE 1 - Name:

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

Principal Office Address:	Mailing Address:	
1111 N. Westshore Blvd, Ste 300	1111 N. Westshore Blvd, Ste 300	
Tampa, Fl. 33607	Tampa, FL 33607	

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:

NRAI SERVICES, INC. N	ame
1200 South Pine Island R	oad
Florida street address (P.O. Box <u>NOT</u> acceptable)
Plantation	FI. 33324
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)
Patricia A. Boverie, Assistant Secretary

(CONTINUED)



Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
(Use attachment if necessary)	
TICLE V: Other provisions, if any.	

ARTICLE IV-

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.

Michael Marget

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)