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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 12/29/21

NAME: NORDIS, INC.

TYPE OF FILING: CONVERSION

COST:

185.00

RETURN: CERTIFIED COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

a Hodge

COVER LETTER

Division of Corporations	
SUBJECT: Nordis, LLC	
(Name of Resulting Florida Limit	ed Company)
The enclosed Articles of Conversion, Articles of Organization Business Entity" into a "Florida Limited Liability Company	on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:	
Soo Jin Islcoff	
(Contact Person)	
Lewis Brisbois	
(Firm/Company)	
110 S.E. 6th Street, Suite 2600	
(Address)	
Fort Lauderdale, RL 33301	
(City, State and Zip Code)	•
soojin.lsicoff@lewisbrisbois.com	
E-mail Address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
Soo Jin Islcoffat (305	304-8304
(Name of Contact Person) (Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount: (All checks p dollars and drawn on a bank located in the United States)	rocessed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certificate of Status \$\$180.00 Filing And Certified Copy \$\$180.00 Filing Fees and Certified Copy	
New Filing Section	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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Articles of Conversion For

"Other Business Entity"

Into

Florida Limited Liability Company

SECRETARY OF STATE TALLAHASSEE, FL

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: Nordis, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entry, the name of the country)
10/04/1990 on
on(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Nordis, 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 after 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 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 27 day of December	_20 <u>_21</u>
Signature of Authorized Representative of Limit	
Signature of Authorized Representative:	Slow
Printed Name: Ronald Sellinger	Title: Manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Conce S. On	
Printed Name: Ronald Selinger	Title: President
Signature:	
Printed Name:	_ Title:
a*	
Signature:Printed Name:	Title:
Fillites Name.	
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title
Printed Name:	
Signature:	
Printed Name:	
If Florida Corporation:	Office
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	corporator must sign.
If Directors of Officers have not been selected, an in-	corporator mass signi
If Florida General Partnership or Limited Liabili	ty Partnership;
Signature of one General Partner.	
	. v
If Florida Limited Partnership or Limited Liabili	ty Limited Partnersnip:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
A d 1 CO contains	\$25.00
Articles of Conversion: Fees for Florida Articles of Organization:	\$25.00 \$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	any is:	
Nordis, LLC (Must contain the words "Limited	d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address o		Liability Company is:
Principal Office Address:	Mailing Address:	
4401 NW 124TH AVE. CORAL SPRINGS, FL 33065	4401 NW 124TH AVE. CORAL SPRINGS, FL 33065	
CONTEST MINOS, 1 E GOODS		
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address SHUHAM SHUHAM I 2455 Hollywood Bould Florida street addres	of the registered agent are: P.A. Name evard ess (P.O. Box NOT acceptable)	2021 DEC 29 PM 4: 18 SECRETARY OF STAT TALLAHASSEE, FL
HOLLYWOOD	FL 33020	-m ω
City	Zip	
registered agent and agree to act in the statutes relating to the proper and co accept the obligations of my position	mated in this cornille i nelest ucce	with the provisions of all I I am familiar with and

(CONTINUED)

	Name and Address:
<u>Title:</u> "AMBR" = Authorized Member	
"MGR" = Manager	
MGR	RONALD SELINGER
	3445 MEADOW BROOKWAY
	DAVIE, FL 33328
	•
	TALLAHASSEE,
	<u></u>
	A
(Use attachment if necessary)	E, FL
	,,,
T.F.V: Other provisions, it any.	
CLE V: Other provisions, if any.	
LE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	2 - 04 5 0 - 7
	Foneld Silver
	Foneld Siling
REQUIRED SIGNATURE	ar an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member	r or an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member	
Signature of a member This document is executed in accordany false information submitted in a	r or an authorized representative of a member

ARTICLE IV-