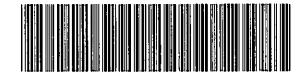
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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	9)
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Certified Copies	_ Certificates of	of Status
Special Instructions to	Ciling Officer	
Special instructions to	Filling Officer.	
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Office Use Only



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2022 JAN 26 PM 3: 16
SECRETARY OF STATE

file 1/20/22

W22-5193



January 14, 2022

ENRICO CAPOBIANCO NUDDHA LLC 7199 VILLAMAR WAY LAKE WORTH, FL 33463

SUBJECT: NUDDHA LLC Ref. Number: W22000005193

We have received your document for NUDDHA LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the marked section in the Articles of Conversion.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Letter Number: 822A00001202

DANIEL L O'KEEFE Regulatory Specialist II

2022 JA

COVER LETTER

TO: New Filing Son Division of C				
SUBJECT:	YUDDIAG (Name of Res	L C alting Florida Limited Com	pany)	
The enclosed Article Business Entity" into	s of Conversion, Articl a "Florida Limited Li	es of Organization, and ability Company" in ac	I fees are submitted to corcordance with s. 605.104:	ivert an "Othe 5, F.S.
Please return all corr	espondence concerning	g this matter to:		
ENRICO (CONTact Person))		
7 199 VII	(Firm/Company) LAMBR W! (Address)	Ay		
ewwo. w	City, State and Zip Code) 12 17 00 00 od used for future annual re			
	on concerning this ma			
NAO G (Name of Conta	POBIAN (S	at (786) (Day	time Telephone Number)	
	for the following amount a bank located in the		ed by this office must be p	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 Fees and Certified Copy	☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status	
Mailing Add New Filing S Division of C P.O. Box 633	Section Corporations	New I Divisi	Address: Filing Section on of Corporations entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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:
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country)
on O/ 17 W (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
WUDNIAR LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: On 100 mulle (Jou 10) (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.

FILED

2022 JAN 26 PM 3: 17

SECRETARY OF STATE
AND ANASSEE, FLORIDA

•			
Signe	d this 4 ld day of Journ		
Signa	ture of Authorized Representative of Lim	ited Liability Company:	
Signal Printe	ture of Authorized Representative:	Title: DWNER out	AGENT/MOWAGER
	ture(s) on behalf of Other Business Entity:		
Signat	ure: and bython		
Printe	ure: PNA O (AFOBIANO	Title: UWNER on	MONACER / MONACER
Printe	ure:	Title:	
Signat	ure:1 Name;		
Printed	I Name;	Title:	
Signat	ure: 1 Name:		
Printed	I Name:	Title:	
Signati	ure:1 Name:		
Printec	l Name:	Title:	
Signati	ure:		
Printec	l Name:	Title:	
	ida Corporation:		
	are of Chairman, Vice Chairman, Director, or ctors or Officers have not been selected, an Inc		
		-	
	ida General Partnership or Limited Liabili ire of one General Partner.	ty Partnership:	
	<u>ida Limited Partnership or Limited Liabili</u> ires of <u>ALL</u> General Partners.	ty Limited Partnership:	200 FAA
<u>All oth</u>	ers:		FIL 2022 JAN 26 SECRETAR FALLAHASS
	are of an authorized person.		
Fees:			SEE 6 I
	Articles of Conversion: Fees for Florida Articles of Organization:	\$25.00 \$125.00	26 PM 3: 17 ARY OF STATE (SSEE, FLORID)
	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 Company is:
WUDDIAG LLC
(Must contain 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: Mailing Address:
7199 VILLAMAR WAY 7199 VILLAMAR WAY LAKE WORTH, FL 33463 LANE WORTH FL 33463
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:
ENNO CAPOBIANO
Florida street address (P.O. Box NOT acceptable)
LAKR WOATH FL 33463 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
Colones Contract
Registered Agent's Signature (REQUIRED)
Registered Agent's Signature (REQUIRED) (CONTINUED) (CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	ENRICO CAPOSIANO 7199 VILLAMAE WAY - CALE WORSH FL, 33663
(Use attachment if necessary)	
CLE V: Other provisions, if any.	TALLANA
REQUIRED SIGNATURE:	SSEE, FLORIO
Table of commence to recover the process of the pro	an authorized representative of a member with section 605,0203 (1) (b). Florida Statutes, I am aware that ment to the Department of State constitutes a third degree felony