L22000237010

(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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NECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 714900 8284021
AUTHORIZATION: Spelle Cleman
COST LIMIT : \$-150.00
ORDER DATE : May 31, 2022
ORDER TIME : 2:02 PM
ORDER NO. : 714900-010
CUSTOMER NO: 8284021
FOREIGN_FILINGS
NAME: BROOKLINE INVESTMENT GROUP LLC
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY
XXXX AMENDMENT/CONVERSION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Eyliena Baker -- EXT#

COVER LETTER

TO:	New Filing Se Division of C				
	Decekte e	Investment Group LLC			
SUB	JECT: Brooking		ulting Florida Limi	ted Com	pany)
					d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Pleas	e return all corn	espondence concerning	g this matter to:		
Denn	is Narlinger				
		(Contact Person)		-	
c/o Si	verman Scherme	er, PLLC			
		(Firm/Company)		-	
401 E	. Las Olas Blvd.,	Suite 1400			
	<u>-</u>	(Address)		-	
Fort L	auderdale, FL 33	•			
	((City, State and Zip Code)	<u> </u>	-	
mtsuj	imoto@brookline	lg.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:		
Mike	Tsujimoto		at (1	
	(Name of Conta	nct Person)	(Area Code	(Day	time Telephone Number)
		for the following amou		process	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 Co	-	\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee,	ection Corporations 27		New I Division The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 nassee, FL 32303

FILED

2022 JUN-1 PM 12: 01

SELICE LARY OF STATE
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:

Brookline Investment Group 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
(Enter state, or it a non-O.S. entity, the name of the country)
05/09/2013
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Brookline Investment Group 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 25th day of May	20_22
Signature of Authorized Representative of Limit	ed Liability Company:
Signature of Authorized Representative: Printed Name: Dennis Narlinger	Title-Manager
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]
Signature: Narlinger Printed Name: Dennis Narlinger	Title: Manny W
Signature: Printed Name:	•
Printed Name:	_ Title:
Signature:Printed Name:	
Printed Name:	
Signature:Printed Name:	
Printed Name:	_ Title:
Signature:Printed Name:	
Signature:	
Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers or Officers have not been selected, an Inc.	corporator must sign.
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y 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

ARTICLE I - Name:		
The name of the Limited Liability Company	is:	
Brookline Investment Group LLC		
(Must contain the words "Limited Liab	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	principal office of the Limited Li	ability Company is:
Principal Office Address:	Mailing Address:	
401 E. Las Olas 8lvd., Sulte 1400	401 E. Las Olas Blvd., Suite 14	0
Fort Lauderdale, FL 33301	Fort Lauderdale, FL 33301	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the	egistered Agent. You must designate an indiv	idual or amother SECRE TALLE
Steven J. Schermer) Z
Nε	ame	A22 - 1
401 E. Las Olas Blvd., Suit	te 1400	SSE 😤 📶
Florida street address (F	P.O. Box NOT acceptable)	PH P: 01
Fort Lauderdale	FL 33301	ر 1915 0
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)

(CONTINUED)

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ARTICLE IV-

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

	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager	Dancia Nadiana
MGR	Dennis Nadinger 401 E. Las Olas Blvd., Suite 1400
	Fort Lauderdale, FL 33301
	Fort Cauderdale, PC 33301
	
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	P. C.
	
Llan assaulturans (Current)	
Use attachment if necessary)	
E.V. Other and delay if and	
LE V: Other provisions, if any.	
	
	
DECUMPED CICNATURE	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
Signature of a member or	an authorized representative of a member
Signature of a member or This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes. I am aware tha
Signature of a member or This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes. I am aware thi
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	e with section 605.0203 (1) (b), Florida Statutes. I am aware thi
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Dennis Narlinger	e with section 605.0203 (1) (b), Florida Statutes. I am aware the iment to the Department of State constitutes a third degree felor
Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Dennis Narlinger	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree felor yped or printed name of signee Filing Fees

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)