L22000302725

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nan	ne)
(D	ocument Number)	·
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	Rec	reivel 28/22
	06	28/22





000387908200

05/23/32--01026--017 **150.00

S. CHATHAM

22 JUH 28 PH 6: 48



June 16, 2022

NÉINE BERTOLINI 1549 NE 123RD STREET NORTH MIAMI, FL 33161 US

SUBJECT: NSB HOLDING BUSINESS LLC

Ref. Number: W22000081764

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

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

The registered agent must sign accepting the designation.

The form submitted was incomplete. Attached with the document is the last page with a require signature and where one could add a person authorized to manage company on.

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

Summer Chatham Regulatory Specialist II New Filing Section

Letter Number: 222A00013464

COVER LETTER

TO:	New Filing S Division of C							
SHR		B HOLDING BY	JSINESS (0	QP				
ŞOD.		(Name of Re	sulting Florida Lim	ited Cor	npany)	_		
					d fees are submitted to ecordance with s. 605.1			ther
Pleas	e return all corr	espondence concernin	g this matter to:			z.,	2022 JUN 28	7 .
	NEIDE	BERTOLINI					HUL	[T ₁
		(Contact Person)					28	
		(Firm/Company)		-			AH II	RECEIVED
	549 NE 12	13 RO STREET		_		57.7.0. 57.7.0.0 57.7.0.0	: 40	\bigcirc
		(Address)				7.0	•	
1	MIAMI, FL	33161		_				
	((City, State and Zip Code)						
		10 jarrect.com		_				
E-r	nail Address: (to b	e used for future annual re	port notifications)					
For fu	irther informatio	on concerning this ma	tter, please call:					
/	UTINE BERI	TOUN!	_at (+1	<u>) 30</u>	25 - 541 - 3950 rtime Telephone Number)	_		
	(Name of Conta	ict Person)	(Area Code) (Day	time Telephone Number)			
		or the following amou a bank located in the		process	sed by this office must b	oe payab	le in t	JS
(\$25 fc & \$125	0.00 Filing Fees or Conversion 5 for Articles anization)	□\$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 Addr New Filing So Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New I Divisi The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite	e 810	CZ JUH 28 FH	

REJECTED FILE# WDQ000081764

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: NSB HOLDING BUSINESS CORP.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(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. entity, the name of the country)
FLORIDA 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: NSB HOLDING BUSINESS 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.
22 JUH 28

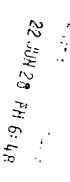
Signed this 23th day of May	20_22
Signature of Authorized Representative of Limite	d Liability Company:
Signature of Authorized Representative: <u>New Control Name: NEIDE DOS SANTOS BERTOLINI</u>	cla Saules Bertolin Title: MEMBER
Signature(s) on behalf of Other Business Entity: [So	
Simpline Mille des Loutes Restol	n
Signature: Now dos Santos Bentolini Printed Name: NEIDE DOS SANTOS BERTOLINI	Title: MEMBER
6'	
Signature: Printed Name:	Title:
Signature: Printed Name:	True .
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Cimatura	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or Of	ficer.
If Directors or Officers have not been selected, an Incor	
If Florida Ceneral Partnership or Limited Liability	Partnershin:

If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.

All others: Signature of an authorized person.

Rejected file # W220000 81764



Rejected file # w22000081764

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nai	me:		
	imited Liability Company i	s:	
NSB HOLDING BUS			
(Mt	ist contain the words "Limited Liabi	lity Company, "L.L.C.," or "LL	.C.")
ARTICLE II - Ad	ldress:		
The mailing address	ss and street address of the	principal office of the L	imited Liability Company is:
Principal Office A	Address:	Mailing Address:	
801 NE 191ST ST		801 NE 191ST ST	
MIAMI, FL 33179		MIAMI, FL 33179	
			
(The Limited Liability Cobusiness entity with an	egistered Agent, Registered ompany cannot serve as its own Registered active Florida registration.) Florida street address of the ROMAR INTERNATIONAL Name	e registered agent are:	
	14334 BISCAYNE BLVD		
	Florida street address (P.	O. Box <u>NOT</u> acceptable	2)
	NORTH MIAMI BEACH	FL ³³¹⁸¹	
	City	Zip	_
liability comp registered agent statutes relating	any at the place designated and agree to act in this cape to the proper and complete ligations of my position as r	in this certificate. I herei icity. I further agree to c e performance of my duti	cess for the above stated limited by accept the appointment as comply with the provisions of all less, and I am familiar with and ded for in Chapter 605, F.S

(CONTINUED)

22 JUH 28 FH 6: 40

Rejected file # W22000081764

\mathbf{A}	RTI	. F. 1	IV-

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

1 itle:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	NEIDE DOS SANTOS BERTOLINI
	801 NE 191ST
	MIAMI, FL 33179
AMBR	VIVIANE L BERTOLINI
	801 NE 191ST
	MIAMI, FL 33179
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
5775 77 Other previsions, it day.	
DEMINDEN SIGNATUDE.	
REQUIRED SIGNATURE:	
	de des Sentes Bertani
Men	ile des Sentes Bertain
Signature of a member of this document is executed in accorda	or an authorized representative of a member more with section 605,0203 (1) (b), Florida Statutes, I am aware th
Signature of a member of any false information submitted in a deas provided for in s.817,155, F.S.	or an authorized representative of a member ince with section 605,0203 (4) (b), Florida Statutes, I am aware the ocument to the Department of State constitutes a third degree felo
Signature of a member of any false information submitted in a deas provided for in s.817,155, F.S.	or an authorized representative of a member once with section 605,0203 (4) (b), Florida Statutes, I am aware the ocument to the Department of State constitutes a third degree felo
Signature of a member of This document is executed in accorda any false information submitted in a deas provided for in s.817,155, F.S.	or an authorized representative of a member more with section 605,0203 (1) (b), Florida Statutes, I am aware th