L23000210612

(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:





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COVER LETTER

ТО:	New Filing 9 Division of 0	Section Corporations				
SUR.	JECT: NN 106	-A. LLC.				
			sulting Florida Lim	ited Co	empany)	
The e Busin	nclosed Article less Entity [®] int	es of Conversion, Artic o a "Florida Limited L	cles of Organiza iability Compan	tion, a _I y" in a	nd fees are submitted to convert an "O' accordance with s. 605,1045, F.S.	ther
Please	e return all cori	respondence concernir	ng this matter to:			
Erico	Fеrreira					
		(Contact Person)		_		
NN 10	06-A, LLC.					
		(Firm/Company)		_		
220 7	1st Street, Sute	# 213				
<u>-</u>		(Address)	-	-		
Miami	Beach, FL 3314	1 1				
		City, State and Zip Code)		-		
ericos	qf@gmail.com					
E-n	nail Address: (to l	oe used for future annual re	port notifications)	-		
For fu	rther informati	on concerning this ma	tter, please call:			
Virginia	a Schwartz		305	、866-	2224	
	(Name of Conta	act Person)	at ((Area Code	√) <u> </u>	ctime Telephone Number)	
Enclos dollars	sed is a check f s and drawn on	for the following amou a bank located in the	int: (All checks p United States)	roces:	sed by this office must be payable in U	S
\$25 for & \$125	0.00 Filing Fees r Conversion for Articles nization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fifing and Certified Cop		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status	
	Mailing Add New Filing So Division of C P.O. Box 632	ection orporations		New I Divisi	t Address: Filing Section ion of Corporations Tentre 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 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.

	(Enter Name of Other Business Entity)
2. The "Other Bus	Limited Liability Company iness Entity is a
	ntity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, for	med or incorporated under the laws of
07/05/0040	(Enter state, or if a non-U.S. entity, the name of the country)
on	
(date of organization	on, formation or incorporation)
3. The name of the	Florida Limited Liability Company as set forth in the attached Articles of Organization:
NN 106-A, LLC.	
	(Enter Name of Florida Limited Liability Company)
	on the date of filing, enter the effective date: : Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
the date this docur Note: If the date insert	ment is filed by the Florida Department of State.) ed in this block does not meet the applicable statutory filing requirements, this date will not be listed as the tee on the Department of State's records.
the date this docur Note: If the date insert document's effective do	ment is filed by the Florida Department of State.) ed in this block does not meet the applicable statutory filing requirements, this date will not be listed as the

Signed this 15 day of December	2022	-		
Signature of Authorized Representative of Li	1			
Signature of Authorized Representative:	7			
Printed Name: Erico Sodre Quirno Ferreira	Title: Authorized Member			
Signature(s) on behalf of Other Business Entity	/			
With Dusiness Entity	1	(s)]		
Signature: Printed Name: Erico Sodre Outrino Ferreira				
Connect State Course Copyrils Perferra	Title: Authorized Member			
Signature:				
Printed Name:	Title;			
Signature: Printed Name:	· Title:			
Signatures				
Signature. Printed Name:	Tids	•		
	Tauc.			
Signature: Prints (Nans)				
Signature: Printed Name:	Title:			
Signature:	•			
Printed Name:	Title:			
If Florida Corporation:				
Signature of Chairman, Vice Chairman, Director, or	Officer			
If Directors or Officers have not been selected, an Ir	ncorporator must sign.	~ _	2	
If Florida General Partnership or Limited Liabil		ALI	123	
Signature of one General Partner.	IIV Partnership:	\$ # H # S	2023 HA K	-
Ef Ph. 21. 12. 15. 18.	,	• ວິ ເຂົ້	20	-
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ity Limited Partnership:	 .	 יכנ	Ţ
		· 2	? ;	
All others:		च् <u>र</u> ्ह ≟;.	7: 07	
Signature of an authorized person.			~ .!	
<u>ges:</u>				
Articles of Conversion:	\$25.00			
hees 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:	
NN 106-A. 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 Com	pany is:
Principal Office Address:	Mailing Address:	
220 71st Street	220 71st Street	
Suite # 213	Suite # 213	
Miami Beach, FL 33141	Miami Beach, FL 33141	
The name and the Florida street address of Virginia Schwartz	Tithe registered agent are:	
	Name	
300 71st Street, Suite #		
	s (P.O. Box <u>NOT</u> acceptable)	
Miami Beach	FL 33141	
City	Zip	
liability company at the place designal registered agent and agree to act in this of statutes relating to the proper and compactions of my position accept the obligations of my position Registered Agent's	and to accept service of process for the above state ited in this certificate. I hereby accept the appointing capacity. I further agree to comply with the provision plete performance of my duties, and I am familiarly as registered agent as provided for in Chapter 605 stignature (p. QUIRED)	nent as ions of all with and
(COP	(1) (1) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	[; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Erico Sodre Quirino Ferreira
	220 71st Street, Suite # 213
	Miami Beach, FL 33141
AMBR	Stela Maria Quirino Ferreira Olyntho Arruda
	220 71st Street, Suite # 213
	Miami Beach, FL 33141
	<u></u>
(Use attachment if necessary)	18 SSE
,	
	· ``
ICLE V: Other provisions, if any.	en e
REQUIRED SIGNATURE:	

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.

Erico Sodre Quirino Ferreira

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certified Copy (Optional) S 5.00 Certificate of Status (Optional)