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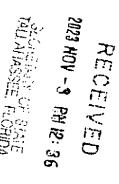
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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## **CT CORP**

#### (850) 656- 4724 3558 lakesore Drive Tallahassee, FL 32312

Da	ate:	11/03/2023	- w: 1 >W
	·	Acc#I20160000072	and of the second
Name:	NILY INVE	STMENT REALTY, INC	C
Document #:			
Order #:	15205303		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing: 🗸	Certified Plain: COGS:		Email Address for Annual Report Notifications:
Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#	Amount	\$ 180.00	

Thank you!

#### **COVER LETTER**

TO:	New Filing Sec Division of Co				
SHR	IFCT: NILY INVE	ESTMENT REALTY, LL	0		
3015	ECT	(Name of Rest	lting Florida Limi	led Com	pany)
The c Busin	enclosed Articles ness Entity" into a	of Conversion, Article a "Florida Limited Lia	es of Organizati bility Company	on, and	I fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Pleas	e return all corres	spondence concerning	this matter to:		
Melis	sa Price				
		(Contact Person)		_	
McDe	ermott Will & Emer	y LLP		_	
<u></u>		(Firm/Company)			
333 5	SE 2nd Avenue, Su	uite 4500		_	
		(Address)			
Mian	ni, FL 33131-2184			_	
	(C	ity, State and Zip Code)			
	orice@mwe.com		<del></del>	_	
E-	-mail Address: (to be	used for future annual rep	oort notifications)		
For f	further information	on concerning this mat	ter, please call:		
Melis	ssa Price		_at ( 305	347-6	5535
	(Name of Contac		(Area Code	(Day	time Telephone Number)
Encl dolla	osed is a check for ars and drawn on	or the following amou a bank located in the	nt: (All checks United States)	process	sed by this office must be payable in US
. 25 & \$1:	150.00 Filing Fees for Conversion 25 for Articles (ganization)	☐\$155.00 Filing Fees and Certificate of Status	S180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Addr New Filing Sc Division of Co P.O. Box 632 Tallahassec, F	ection orporations 7		New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

### **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: NILY INVESTMENT REALTY, 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. entity, the name of the country)
10/07/1986 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:
NILY INVESTMENT REALTY, 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 31 day of August	20_23
Signature of Authorized Representative of Limite	
Signature of Authorized Representative:	Da Ja
Printed Name: Nily Falic	Title Authorized Member
Signature(s) on behalf of Other Bysiness Entity: [S	iee below for required signature(s)
Signature: All Falic	
Printed Name: Nily Falic	Title: President
Signature:	
Printed Name:	Title:
Signature	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signatura	
Signature. Printed Name:	Title:
Signature.	
Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership;
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25 00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must contain the words "Limited L	
	liability Company, "E.U.C.," or "LLC."
ARTICLE II - Address: The mailing address and street address of the mailing address and street address.	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6100 HOLLYWOOD BLVD	6100 HOLLYWOOD BLVD
SUITE #407	SUITE #407
HOLLYWOOD, FL 33024	HOLLYWOOD, FL 33024
business entity with an active Florida registration.)	Registered Agent. You must designate an individual or another
business entity with an active Florida registration.)  The name and the Florida street address of  David Taney	
The name and the Florida street address of  David Taney	
The name and the Florida street address of  David Taney	the registered agent are:  Name
The name and the Florida street address of  David Taney  6100 HOLLYWOOD BLY	the registered agent are:  Name
The name and the Florida street address of  David Taney  6100 HOLLYWOOD BLY	the registered agent are:  Name  VD., 7TH FLOOR

Registered Agent's Signature (REQUIRED

(CONTINUED)

#### ARTICLE IV-

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

"AMRD" - Authorized March	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	NILY FALIC
	9999 COLLINS AVE., APT 3A
	BAL HARBOUR, FL 33154
	DAL HARBOUR, FL 33154
<del></del>	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)  LE V: Other provisions, if any.	
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LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE!	
REQUIRED SIGNATURE! Signature of a member or a	an authorized representative of a member
Signature of a member or a	with section 605.0203 (1) (b). Florida Statutes. I am aware
REQUIRED SIGNATURE!  Signature of a member or a This document is executed in accordance with the second and the	with section 605.0203 (1) (b). Florida Statutes. I am aware
Signature of a member or a This document is executed in accordance wany false information submitted in a document as provided for in s.817.155. F.S.  Nily Falic	with section 605.0203 (1) (b), Florida Statutes. I am aware tent to the Department of State constitutes a third degree fe
Signature of a member or a This document is executed in accordance wany false information submitted in a document as provided for in s.817.155. F.S.  Nilly Falic	with section 605.0203 (1) (b). Florida Statutes, I am aware

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

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