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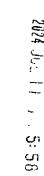
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PICK-UP	WAIT	MAIL	
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Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

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.

	(Enter Name of Other Business Entity)
2. The "Other Busines (Enter entity	S Entity" is a type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
	florida d or incorporated under the laws of
	(Enter state, or if a non-U.S. entity, the name of the country)
on(date of organization, I	ormation or incorporation)
3. The name of the Flo	orida Limited Liability Company as set forth in the attached Articles of Organization:
NO	TAX ACCOUNTING & SERVICES, LLC
	(Enter Name of Florida Limited Liability Company)
4. If not effective on t	ne date of filing, enter the effective date:
(The effective date: C the date this documen Note: If the date inserted i	annot be prior to date of receipt or filed date nor more than 90 calendar days after it is filed by the Florida Department of State.) In this block does not meet the applicable statutory filing requirements, this date will not be listed as the in the Department of State's records.
	on 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 06 day of 27	_20_ <i>J</i>		
Signature of Authorized Representative of Limit	ted Liability Company:		
	Det		
Signature of Authorized Representative:	AMRD		
Printed Name: NOUALYS GONZALEZ	_ little:AMBR		
/ Signature(s) on behalf of Other Business Entity: [See below for required signature(s))		
Signature:Printed Name: NODALYS GONZALEZ			
Printed Name: NODALYS CONZALEZ	_ Title: PRESIDENT		
Signature:	Tide		
Printed Name:			
Signature			
Signature:Printed Name:	Title:		
Signature:Printed Name:			
Printed Name:	Title:		
0.			
Signature: Printed Name:	Title:	•	
rinted Name		•	
Signature:	<u> </u>		
Signature:Printed Name:	_ Title:		
If Florida Corporation:	207		
Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc			
II Directors of Officers have not been selected, an inc	torporator musi sign.		
If Florida General Partnership or Limited Liabilit	ty Partnership:		
Signature of one General Partner.			
If Florida Limited Partnership or Limited Liabilit	y Limited Partnership:		
Signatures of ALL General Partners.			
All others:			
Signature of an authorized person.			
		; -	202
<u>Fees:</u>		•	2024 Ji.
	625.00		, ,
Articles of Conversion:	\$25.00		_
Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Optional)		
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)		-
Certificate of Status;	55.00 (Optional)	•	Ċ١٠
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na	me:					
	imited Liability Company	is:				
	ACCOUNTING & SERVICES				_	
(M	ust contain the words "Limited Lia	bility Company,	L.L.C.," or "LLC.")			
ARTICLE II - And The mailing address	ddress: ss and street address of the	e principal of	fice of the Limi	ted Liability C	Company is:	
Principal Office	Address:	Mailing	Address:			
2500 NW 79th Ave Ste 157 Doral, FL 33122			2500 NW 79th Ave Ste 157 Doral, FL 33122			
D0181, 1 L 33122						
(The Limited Liability C business entity with an	Registered Agent, Registe Company cannot serve as its own R active Florida registration.) Florida street address of the	egistered Agent. \	fou must designate a	gent's Signat n individual or and	ure: other	
	NODALYS	GONZALEZ				
	N	ame				
	2500 NW 79th	-				
	Florida street address (P.O. Box <u>NO</u>	<u>T</u> acceptable)			
	Doral	FL	33122			
	City		Zip			
liability com registered agent statutes relativ	med as registered agent ar pany at the place designate and agree to act in this ca ag to the proper and comple bligations of my position as Registered Agent's S	nd in this certif pacity. I furth ete performan s registered as	icate, I hereby of her agree to com ce of my duties, hent as provided	iccept the appo ply with the pr and I am fami	ointment as rovisions of al liar with and	
	(CON)	ΓINUED)		,	င္သ၊	
	(5011)				C)	

ARTICLE IV-

as provided for in s.817.155, F.S.

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

NODALYS GONZALEZ		
2500 NW 79th Ave Ste 157		
Doral, FL 33122		
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	2500 NW 79th Ave Ste 157 Doral, FL 33122	2500 NW 79th Ave Ste 157 Doral, FL 33122

NODAWS GON ZALE 2.

Typed or printed name of signee

any false information submitted in a document to the Department of State constitutes a third degree felony