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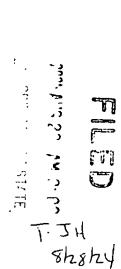
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Special Instructions to	Filing Officer:	





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# COVER LETTER

TO: New Filing So Division of C			
SUBJECT:	MC2 SM C (Name of Res	on struction sulting Florida Limited Con	npany)
			od fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concerning	g this matter to:	
NC3 S		rero ruction Cri 31VD, Apt a	
Sem	100 e 7L City, State and Zip Code)	33172	
E-mail Address: (to b	e used for future annual re	port notifications) $\bigcirc$	astruction group.com
^	on concerning this mat Mayre ro ct Person)	•	44-0508 rtime Telephone Number)
	or the following amou a bank located in the	•	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
<u>Mailing Addi</u> New Filing So			1 Address: Filing Section

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Signed this 16 day of August 20 24	
Signature of Authorized Representative of Limited Liability Compa	
Signature of Authorized Representative:  Printed Name: Steppen Marcero Title: Proje	at Account Manager
Signature(s) on behalf of Other Business Entity: [See below for requir	•
Signature:	ruction Project manager
Signature:	•
Printed Name:Title:	
Signature: Title:	
Signature: Title:	
Printed Name:Title:	
Signature:Title:	
Signature: Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.	
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Limited Partnersh Signatures of <u>ALL</u> General Partners.	ip:
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)	· 3

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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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: $\frac{1}{12} \frac{1}{12} $
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of
on 2/23/2018 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  MG5M Construction 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.

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
NBSM Construction Group, LLC	
(Must contain the words "Limited Liability Company, "L.I.C./" or "LLC.")	

### ARTICLE II - Address:

ARTICLE I - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
12050 Park BIVD	PO BOX 4723
A-r + 218	Seminole, FL 33772-9948
Seminole FL 33772	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Steven Marrero

Name

12050 Park BIVD, Apt 228

Florida street address (P.O. Box NOT acceptable)

Seminole FL 33772

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

"AMBR" = Authorized Member "MGR" = Manager	<b>A</b> a
Construction Manager	· Nelvin & Partilla
	12050 Pack Blup Apr
	Seminale FL 3377
Project Construction M	10.0 51
Iroged Construction M	Gr Steven Marrer
ı	GP Steven Marrero 12050 Park 13140 Seminale, FL 33777
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(Use attachment if necessary)  LE V: Other provisions, if any.	
(Use attachment if necessary)  LE V: Other provisions, if any.	
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LE V: Other provisions, if any.	t M
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance any false information submitted in a document.	an authorized representative of a member with section 605 0203 (1) (b). Florida Statutes. I am aware that nent to the Department of State constitutes a third degree felor
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S.	with section 605 0203 (1) (b). Florida Statutes. I am aware that nent to the Department of State constitutes a third degree felor
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S.	with section 605 0203 (1) (b). Florida Statutes. I am aware that nent to the Department of State constitutes a third degree felor the venture of Marcer Decorprinted name of signee
REQUIRED SIGNATURE:  Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Typ	with section 605 0203 (1) (b). Florida Statutes. I am aware that nent to the Department of State constitutes a third degree felor