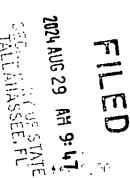
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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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2024 AUG 29 AM (1: 1) PŘEVÁDICKAL TORIKE

COVER LETTER

	of Corporations				
SUBJECT: NH	26 MANAGEMENT INC				
SUBJECT:	(Name of Re	sulting Florida Limi	ted Cor	npany)	_
The enclosed Ar Business Entity	rticles of Conversion, Artic `into a "Florida Limited L	eles of Organizati iability Company	ion, ar y``in a	nd fees are submitted to eccordance with s. 605.	convert an "Other 1045. F.S.
Please return all	correspondence concernir	ig this matter to:			
Noa Hen					
	(Contact Person)		-		
NH 26 MANAGEI	MENT INC				202
	(Firm/Company)		-		A A
7520 NW 5TH ST	T STE 103)6 2
	(Address)		-		9 .
PLANTATION, FI	L 33317				2024 AUG 29 AM 9: 47 SECHLIANASSEE, FL
	(City. State and Zip Code)		-		9: -
NH26MANAGEM	IENT@GMAIL.COM				田一
E-mail Address	(to be used for future annual re	port notifications)	-		
For further infor	mation concerning this ma	itter, please call:			
NOA HEN		561 at (5255	5189	
(Name of	Contact Person)	(Area Code)	(Day	(time Telephone Number)	_
	eck for the following amoun on a bank located in the		roces	sed by this office must	be payable in US
■ \$150.00 Filing F (\$25 for Conversion & \$125 for Articles of Organization)	n and Certificate of	□\$180.00 Filing and Certified Cor		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	ng Section of Corporations		New Divis	t Address: Filing Section ion of Corporations Centre 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 <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 o	of the "Other Business Entity" immediately prior to the filing of the Art SEMENT INC	ticles of Conversion is:
	(Enter Name of Other Business Entity)	
2. The "Other	r Business Entity" is a	
(Ei	inter entity type. Example: corporation, limited partnership, general partnership, com	amon law or business trust, etc.)
First organized	d. formed or incorporated under the laws of	1
07/13/2018	(Enter state, or if a non-O.S. entity,	the name of the country)
(date of organ	anization, formation or incorporation)	F STA
3. The name o	of the Florida Limited Liability Company as set forth in the attached A	rticles of Organization:
NH 26 MANAGI	SEMENT LLC	
	(Enter Name of Florida Limited Liability Company)	<u></u> .
4. If not effect	tive on the date of filing, enter the effective date:	·
(The effective the date this d Note: If the date	e date: Cannot be prior to date of receipt or filed date nor more than document is filed by the Florida Department of State.) inserted in this block does not meet the applicable statutory filing requirements, this extive date on the Department of State's records.	n 90 calendar days after
5. The plan of o	conversion has been approved in accordance with all applicable statute	2S.
	rted or Other Business Entity" has agreed to pay any members having appropriate are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	raisal rights the amount to

Signed this <u>08</u> day of <u>28</u> 20 24 Signature of Authorized Representative of Limited Liability Company: Signature of Authorized Representative: _____ Printed Name: Noa Hen Title: President Signature(s) on behalf of Other Business Entity: |See below for required signature(s)| Title: Prosiciont Printed Name: Noo- W Printed Name:_______Title:_____ Printed Name:_____ Title: _____ Printed Name:_______Title:______ 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 Incorporator must sign. 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.

\$25.00

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

Fees:

Articles of Conversion:

Certificate of Status:

Certified Copy:

Fees for Florida Articles of Organization:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

s :
lity Company, "L.L.C.," or "LLC.")
orincipal office of the Limited Liability Company is:
Mailing Address:
17111 Biscayne Blvd
#1603
North Miami Beach, FL 33160(1) \$2
registered agent are:
O. Box NOT acceptable)
33160
Zip
to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 605, F.S

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Noa Hen
	17111 Biscayne Blvd #1603
	North Miami Beach, FL 33160
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	FIA
(Use attachment if necessary)	
SIRW od	
CLE V: Other provisions, if any.	
	1
REQUIRED SIGNATURE:	<i>(</i> ,
	Add -
Signature of a member or	an authorized soussentation of a second
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the
any false information submitted in a decur	(1) (b), I fortua buttues, I alli awate ti
any raise information submitted in a docti	ment to the Department of State constitutes a third degree feld
as provided for in s.817.155, F.S.	ment to the Department of State constitutes a third degree feld
as provided for in s.817.155, F.S.	nent to the Department of State constitutes a third degree fek

Typed or printed name of signee

Filing Fees

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