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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
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COVER LETTER

Division of Corporations						
SUBJECT: Noko FL LLC						
(Name of Re	sulting Florida Lin	ited Con	npany)			
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L	_)ther
Please return all correspondence concerning	g this matter to					
David A. Fisher						
(Contact Person)						
Bentley Properties Inc						
(Firm/Company)		_			F	
15816 Pendio Drive					6.2% 63.0Z	
(Address)		_				
Montverde FL 34756					(נגי	
(City. State and Zip Code)					F:: 4:	
annaefisher@gmail.com				• ••,	±. ⊄1	•
E-mail Address: (to be used for future annual re	port notifications)	_			ယ	
For further information concerning this ma	nter, please call	:				
David Fisher	_at (785-	1955			
(Name of Contact Person)	(Area Cod	e) (Day	vtime Telephone Numbe	er)		
Enclosed is a check for the following amordollars and drawn on a bank located in the	•	proces	sed by this office mi	ust be paya	able in	US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) S150.00 Filing Fees and Certificate of Status	□\$180.00 Filir and Certified C	_	☐\$185.00 Filing Fee Certified Copy, and Certificate of Status	·s.		
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		New Divis The O	t Address: Filing Section ion of Corporations Centre of Tallahasse N. Monroe Street, S			

Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form to convert an "Other Business Entity" into a "Florida Limited Liability Company" pursuant to section 605.1045, Florida Statutes. These forms are basic and may not meet all conversion needs. The advice of an attorney is recommended.

Pursuant to s. 605.0102(23)a, F.S., entity means: a business corporation, a nonprofit corporation, a general partnership, including a limited liability partnership, including a limited partnership, including a limited liability limited partnership; a limited liability company; a real estate investment trust; or any other domestic or foreign entity that is organized under an organic law.

Filing Fees: \$150.00 (\$25 for Articles of Conversion and

\$125 for Articles of Organization)

Certified Copy (optional): \$30.00

Certificate of Status (optional): \$5.00

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing Address:

New Filing Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

For further information, you may contact the New Filing Section at (850) 245-6052.

Important Notice: As a condition to the conversion, pursuant to s.605.0212(9), F.S., each party to the conversion must be active and current through December 31 of the calendar year this document is being submitted to the Department of State for filling.

INHS11 (7/17)

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 Noko LLC	of Conv	ersion i	is:
(Enter Name of Other Business Entity)		(<u>~</u> .2)	
2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common la	<u>-</u>	ाउँ हर्म . जि.	
(Enter entity type. Example: corporation, limited partnership, general partnership, common la	iw or bus	iness trus	st, etc.
First organized, formed or incorporated under the laws of	<u> </u>	ω	
(Enter state, or if a non-U.S. entity, the nar			
on		<u>::</u>	« . «
(date of organization, formation or incorporation)		ω	
3. The name of the Florida Limited Liability Company as set forth in the attached Article	s of Or	ganizat	ion:
Noko FL 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 centre 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 we 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

ARTICLE I - Name:

The name of the Limited	d Liability Comp	any is:				
Noko FL LLC					_	
(Must con	tain the words "Limited	d Liability Company,	"L.L.C.," or "LLC.")			
ARTICLE II - Addres The mailing address and		f the principal o	ffice of the Limite	ed Liability	Comp	any is:
Principal Office Addre	ess:	<u>Mailin</u>	g Address:			
15816 Pendio Drive Montverde, FL 34756		Same			202t	
ARTICLE III - Regist (The Limited Liability Compan business entity with an active	y cannot serve as its ov	istered Office, wn Registered Agent.	& Registered Ag You must designate an	ent's Signa individual or a	ature: mother	
The name and the Florida street address of the registered agent are:				* (*)	<u>-6</u>	****
Anna E. Fisher						<i>لو</i> . •
		Name			53	
158	16 Pendio Drive					
Flo	orida street addre	ss (P.O. Box <u>NC</u>	<u>)T</u> acceptable)			
Mor	ntverde	FL ³	34756 			
	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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**	А				1 V -

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 MGR	David A. Fisher				
	15816 Pendio Drive				
	Montverde FL 34756				
MGR	Anna E. Fisher				
	15816 Pendio Drive				
	Montverde FL 34756				
	•				
		=======================================			
		<u></u>			
		ti			
(Use attachment if necessary)					
ICLE V: Other provisions, if any.					
REQUIRED SIGNATURE:					
Dand a. Lisher					
Signature of a member or	an authorized representative of	a member			

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.

Fisher
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)

\$5.00 (Optional)

Certificate of Status: