Section 1

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SECRETARY OF STATE

COVER LETTER

P. O. Box 6327

Tallahassee, FL 32314

TO: Registration Section Division of Corporations
SUBJECT: NETWORKS-U.S.A. XXI, LLC
(Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
THOMAS O. KATZ (Contact Person)
KATZ BASKIES LLC (Firm/Company)
2255 GLADES RD SUITE 240W
BOCA RATON FL 33431 (City, State and Zip Code)
<u>Hhomas. Katz e Katzbaskies</u> . Com E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Thomas 0. Katz at (561) 910-5700 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees
STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

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 Entire" immediately unless the filling of the Adiabase Communication	
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: NETWORKS -U.S.A. XXI, INCORPORATED	
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a <u>CORPORATION</u> .	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or incorporated under the laws ofFURIDA	
on 826 1688 (Enter state, or if a non-U.S. entity, the name of the country) (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organizatio	n:
NETWORKS-U.S.A. XXI, LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date:	
(The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the date this document is filed by the Florida Department of State; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)	ive
5. The plan of conversion has been approved in accordance with all applicable statutes.	
Page 1 of 2 Page 1 of 2 AHA	'i è
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Signed this and day of October	20_14	
Signature of Authorized Representative of Limit	ed Liability Company:	
Signature of Authorized Representative: Printed Name: JASON FELDMAN	Title: MANAGER	-
Signature(s) on behalf of Other Business Entity: [S	See below for required signature(s).]	
Signature: Printed Name: JASON FEVDINAN	Title: PRESIDENT	- -
Signature:Printed Name:	_ Title:	- -
Signature:Printed Name:	_Title:	- -
Signature: Printed Name:	_Title:	- -
Signature:Printed Name:	Title:	- -
Signature:Printed Name:	_Title:	- -
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or C If Directors or Officers have not been selected, an Inc		
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	v Limited Partnership:	
All others: Signature of an authorized person.		TANTE AND
Fees:		OCT CRED
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	-6 PHI2: 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NETWORKS U.S.A XXI, (Must end with the words "Limited Liability	ry Company, "L.L.C.," or "LLC.")	<u>. </u>
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
5100 PGA BIVD State 317 Palm Beach Gardens, Fl 33418	PO Box 30278 Palm Beach Garden	<u>5, FL 3</u> 3420
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)		
The name and the Florida street address of the re	egistered agent are:	
JASON FEL	DMAN	
Name	,	
5100 PGA BIVA Florida street address (P.O.	Sute 317 Box NOT acceptable)	
Palm Beach Garde	nsfl 33418 Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p accept the obligations of my position as reg	this certificate, I hereby accepty. I further agree to comply verformance of my duties, and	pt the appointment as with the provisions of all I am familiar with and
M		OCT -6
Registered Agent's Sign	ature (REQUIRED)	
(CONTIN	UED)	E D PM I2: 23 OF STATE FLORIDA
Page 1 of	12	4.0

"MGR" = N	Authorized Member Manager	
_	_	
		JASON FELDMAN
		PO BOX 30278 Palm Beach Gardens, FL 33420
		
(Use attach	ment if necessary)	
·	•	e date of filing: . (OPTIONAL)
RTICLE V: Effe	ective date, if other than the	e date of filing: (OPTIONAL) be specific and cannot be more than five business days price
RTICLE V: Effe	ective date, if other than the	e date of filing: (OPTIONAL) be specific and cannot be more than five business days price
RTICLE V: Effe f an effective date or 90 days after	ective date, if other than the	e date of filing: (OPTIONAL) be specific and cannot be more than five business days price
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RTICLE V: Effer f an effective date or 90 days after RTICLE VI: Oth REQUIRE	ective date, if other than the e is listed, the date must the date of filing.) er provisions, if any. D SIGNATURE: Signature of a member with section 605.0203 (the affirmation under the penalest.	r or an authorized representative of a member (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are true.
RTICLE V: Effer f an effective date or 90 days after RTICLE VI: Oth REQUIRE (In accordance constitutes an a I am aware tha	ective date, if other than the e is listed, the date must the date of filing.) er provisions, if any. D SIGNATURE: Signature of a member with section 605.0203 (faffirmation under the penalt any false information su	r or an authorized representative of a menibe of this document of this document be business days prior an authorized representative of a menibe of this document of this document be business days prior and authorized representative of a menibe of this document of this document of this document of this document be business days prior and authorized representative of a menibe of the perior that the facts stated herein are true business days prior to the perior that the facts stated herein are true business days prior to the perior that the facts stated herein are true.
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ARTICLE IV-

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional) Page 2 of 2