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(Requestor's Name)
(Address)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: NETWORKS - U.S.A. XVII, 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 D. KATZ (Contact Person) KATZ BASKIES LLC (Firm/Company) 2255 GLADES RD SUITE 240W (Address) BOCA RATON, FL 33431 (City, State and Zip Code) +homas, katz e katzbaskies.com E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
(Name of Contact Person) at (56) 910-5700 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\int \frac{1}{3}\fra
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization 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 NETWORKS -U.S.A. XVII, INCORPORATED	of Conv	versio	n is:
(Enter Name of Other Business Entity)			
(Enter Name of Other Dusiness Entry)			
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 of FUPIDA			_
on 8 10 1988 (Enter state, or if a non-U.S. entity, the nai	ne of the	: countr	·y)
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Article	s of Or	ganiz	ation:
NETWORKS-U.S.A. XVII, 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 9			
date this document is filed by the Florida Department of State; AND 2) must be the sadate listed in the attached Articles of Organization, if an effective date is listed therein		tne ei	iective
5. The plan of conversion has been approved in accordance with all applicable statutes.			
Page 1 of 2	FALLA ALLA	00 71.	, s .
		- T	ent person

SECRUMRY OF STATE

Signed this and day of October	20_14		
Signature of Authorized Representative of Limi	ited Liability Company:		
Signature of Authorized Representative: Printed Name: JASON FELDMAN	Title: NANA6ER		
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]		
Signature: Printed Name: JASON FELDMAN			
Printed Name: JASON FELDMAN	Title: PRESIDENT	_	
Signature:			
Signature: Printed Name:	Title:	<u> </u>	
Signature:			
Signature: Printed Name:	Title:	_ -	
Signature:			
Signature: Printed Name:	Title:	_	
Signature:			
Signature: Printed Name:	Title:	-	
Signature:			
Printed Name:	Title:	_	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.			
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:		
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:		
All others: Signature of an authorized person.		Ä.a	
Fees:			•
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	4 OCT-6 PH I2: 2 ECRETARY OF STA LLAHASSEE, FLOR	Control of the Contro

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
NETWORKS-U.S.A XVII, L (Must end with the words "Limited Liability C	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prince	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5100 PGA BIVD State 317 Paim Beach Gardens, FL 33418	PO Box 30278 Palm Beach Gardens, FL 33420
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	ffice, & Registered Agent's Signature: d Agent. You must designate an individual or another
The name and the Florida street address of the regi	istered agent are:
JASON FELD Name	MAN
5100 PGA BIVA Florida street address (P.O. B	Surte 317 ox NOT acceptable)
Palm Beach Garden City	5FL 33418 Zip
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete per accept the obligations of my position as regist	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 605, F.S.
Registered Agent's Signati	
(CONTINUE Page 1 of 2	PHIZ: 24 ELFLORIBA

e: IBR" = Authorized Member IR" = Manager MGR.	Name and Address: JASON FELDMAN PO BOX 30278 Palm Beach Gardens, FL 33420
	JASON FELDMAN PO BOX 30278 Palm Beach Gardens, FL 33420
<u> </u>	
·	Palm Beach Gardens, FL 33420
	FAIR BELLY! GARACITY, PC 3512
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•	
	·
attachment if necessary)	
VI: Other provisions, if any.	
	•
DUIRED SIGNATURE:	•
DUIRED SIGNATURE:	
	r an authorized representative of a member
Signature of a member of ordance with section 605.0203 (1) (r an authorized representative of a member (b), Florida Statutes, the execution of this document
Signature of a member of ordance with section 605.0203 (1) (ates an affirmation under the penaltic	b), Florida Statutes, the execution of this document es of perjury that the facts stated herein are true.
Signature of a member of ordance with section 605.0203 (1) (ates an affirmation under the penalticate that any false information subm	b), Florida Statutes, the execution of this document es of perjury that the facts stated herein are true intend in a document to the Department of State
Signature of a member of ordance with section 605.0203 (1) (ates an affirmation under the penalticate that any false information submates a third degree felony as provide	(b), Florida Statutes, the execution of this document es of perjury that the facts stated herein are true nitted in a document to the Department of State d for in s.817.155, F.S.)
Signature of a member of ordance with section 605.0203 (1) (ates an affirmation under the penalticate that any false information submates a third degree felony as provide	(b), Florida Statutes, the execution of this document es of perjury that the facts stated herein are true intended in a document to the Department of State of for in s.817.155, F.S.)
Signature of a member of ordance with section 605.0203 (1) (ates an affirmation under the penalticate that any false information submates a third degree felony as provide	b), Florida Statutes, the execution of this document es of perjury that the facts stated herein are true nitted in a document to the Department of State of for in s.817.155, F.S.)
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Signature of a member of ordance with section 605.0203 (1) (ates an affirmation under the penalticate that any false information submates a third degree felony as provide	(b), Florida Statutes, the execution of this document tes of perjury that the facts stated herein are true intend in a document to the Department of State of for in s.817.155, F.S.)
Signature of a member of ordance with section 605.0203 (1) (ates an affirmation under the penaltic vare that any false information submates a third degree felony as provided TASO. Typed	b), Florida Statutes, the execution of this document es of perjury that the facts stated herein are true nitted in a document to the Department of State of for in s.817.155, F.S.) N FELDMAN I or printed name of signee

ARTICLE IV-