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(Requestor's Name)
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(Business Entity Name)
(Document Number)
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#### TRANSMITTAL LETTER

TO>	Registration So Division of Co					
SUBJE	CT: MOUSE	OVER MEDIA (Name of Limite	d Liability Comp	my)	***************************************	
		f Organization and fee(s) are s	·			
riease i		ondence concerning this matte	t to the tollowing	,		
	TWINK	MATKOVSKI (I	Vanue of Person)			
MOU	SEOVER MED	NA, LLC				
			Firm Company j			
	1039 COLL	INSWOOD DR. W			\$\frac{1}{2} \cdot	1
			(Address)		F. A.	18 PH 12:51
	JACK	KSONVILLE, FL 32225			A SS	5
	Application of the	(City)	State and Zip Code	}	mg To	N 12
For furt	her information	concerning this matter, please	call:		TATE	5
JANN	MATKOVSKI		at ( 904	343-7213		
	(Name	of Person)	(Area Cod	e & Daytime Te	elephone Number)	
Enclos	ed is a check fo	or the following amount:				
<b>v</b> \$125	.00 Filing Fee	Certificate of Status	Certified Copy	y	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
STREET ADDRESS:			MAILING A	DDRESS:		

Registration Section Division of Corporations 409 E. Gaines Street Taliahassee, Florida 32399 Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

#### CERTIFICATE OF CONVERSION

Pursuant to section 608.439, Florida Statutes, the following unincorporated business entity hereby submits the attached articles of organization and this certificate of conversion to convert to a Florida limited liability company:

FIRST: The name of the unincorporated business immediately prior to filing this document was:
MOUSEOVER MEDIA, LLC
SECOND: The date on which and the jurisdiction in which the unincorporated business was first created or otherwise came into being are:
A. Date: 09/09/2002
B. Jurisdiction:
C. If different from the above noted jurisdiction, the jurisdiction immediately prior to its conversion:
THIRD: The name of the limited liability company as set forth in the <u>attached</u> articles of corganization is:
MOUSEOVER MEDIA
flight Fish
Signature of a Member or an Authorized Representative of a Member (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
JANNA MATKOVSKI
Typed or Printed Name of Signee

#### FILING FEES:

\$100.00 Filing Fee for Articles of Organization \$ 25.00 Filing Fee for Registered Agent Designation

\$ 25.00 Filing Fee for Certificate of Conversion

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

(Note: Section 608.439, F.S., does not provide for a corporation to convert to a limited liability company.)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:
MOUSEOVER MEDIA, LLC	
ARTICLE II - Address: The mailing address and street address of th	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1039 COLLINSWOOD DR. W	1039 COLLINSWOOD DR. W
JACKSONVILLE, FL 32225	JACKSONVILLE, FL 32225
The name and the Florida street address of the Janna Matkovski No. 1039 COLLINSWOOD DR	PH 12:51
	t address (P.O. Box NOT acceptable)
JACKSONVILLE	m: 32225
	ate, and Zip
liability company at the place designated registered agent and agree to act in this cape statutes relating to the proper and complete accept the obligations of my position as r	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all e performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S

(CONTINUED)

Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managir	Name and Address: ng Member	
MGR	ALEXANDRE MATKOVSKI	
<u> </u>	1039 COLLINSWOOD DR. W	••.
	JACKSONVILLE, FL 32225	• •
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(Use attachment if no	ecessary)	<b>-</b>
NOTE: An addition	nal article must be added if an effective date is requested.  ATURE:	DE JUL 18 PHID:
(In	nature of a member or an authorized representative of a member.  accordance with section 608.408(3), Florida Statutes, the execution this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.	F 5

JANNA MATKOVSKI

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)