14006157756

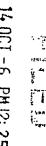
Office Use Only



500262290005

10/06/14--01062--012 **3900.00

14 OCT - 6 PHI2: 25
SECREDARY OF STATE
ALL ARASSEC FLOOR



COVER LETTER

Division of Corporations
SUBJECT: NETWORKS - U.S.A. VII, 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 (Address)
BOCA RATON, FL 33431 (City, State and Zip Code)
<u>+homas. Katz e Katzbaskies.com</u> E-mail Address: (to be used for future annual report notifications)
For further information concerning this matter, please call:
Thomas O. 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 (\$25 for Conversion & \$125 for Articles of Organization) \$\begin{array}{cccccccccccccccccccccccccccccccccccc
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

Tố: Registration Section

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 Conversion is: NETWORKS - U.S.A. VII. 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 of FURIDA
on 11/24/1987 (date of organization, formation or incorporation) (Enter state, or if a non-U.S. entity, the name of the country)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
NETWORKS-U.S.A. VII, 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; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)
5. The plan of conversion has been approved in accordance with all applicable statutes.

Page 1 of 2

14 OCT -6 PHIZ: 25

SECRETARY OF STATE

NALLAHASSEE FLORIDA

Signed this and day of October	20 14
Signature of Authorized Representative of Lim	
Signature of Authorized Representative: M Printed Name: JASON FELDMAN	Title: MANAGER
Signature(s) on behalf of Other Business Entity:	
Signature:	
Signature: Printed Name: JASON FELDMAN	Title: PRESIDENT
Signature:	
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 f Directors or Officers have not been selected, an In	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	tv Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
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)

Page 2 of 2

14 OCT -6 PH I2: 25

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

٤	The name of the Limited Liability Company is:	
	NETWORKS-U.S.A VII, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	
	ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
	Principal Office Address: Mailing Address:	
	5100 PGA BIVO Scute 317 PO Box 30278 Palm Beach Gardens, Fl 33418 Palm Beach Gardens, Fl 33420	
	ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)	
	The name and the Florida street address of the registered agent are:	
	JASON FELDMAN	
	Name	
	5100 PGA BIVA Suite 317 Florida street address (P.O. Box NOT acceptable)	
	Palm Beach Gardens FL 33418 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 a 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	ıll
	Registered Agent's Signature (REQUIRED) Resistered Agent's Signature (REQUIRED)	
	(CONTINUED)	
	Page 1 of 2	

Δ	R	TI	\boldsymbol{C}	ī	r I	W_{-}

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	JASON FELDMAN PO Box 30278 Palm Beach Gardens, Fl 33420			
<u></u>				
. (Use attachment if necessary)				
an effective date is listed, the date must be 90 days after the date of filing.) TICLE VI: Other provisions, if any.	date of filing: (OPTIONAL) De specific and cannot be more than five business days p			
REQUIRED SIGNATURE:				
Signature of a member	or an authorized representative of a member.			
constitutes an affirmation under the penal	(b), Florida Statutes, the execution of this document ties of perjury that the facts stated herein are true omitted in a document to the Department of State ded for in s.817.155, F.S.)			
	ed or printed name of signee			
Filing Fees: \$125.00 Filing Fee for Articles of of Registered Agent \$ 30.00 Certified Copy (Optional	5			
\$ 5.00 Certificate of Status (Opt	tional)			