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(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	≘ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
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	cument Number)	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE
TALL A HASSEE, FLORIBA

B. BOSTICK

OCT 1 4 2014

EXAMINER

COVER LETTER

TO: Registration S Division of C					
SUBJECT: REEL	AMERICAN, LLC				
	(Name	of Resulting Florida Limite	d Company)	_	
Business Entity" into		ability Company" in a	d fees are submitted to ccordance with s. 605.1		Other
Thomas J. Dobbin	s				
	(Contact Person)				
Trow & Dobbins, F	P.A.				
	(Firm/Company)				
1301 NE 14th Stre	et				
	(Address)				
Ocala, FL 34470					
((City, State and Zip Code)				
judy@ocalalawfirm	n.com				
E-mail Address: (to b	e used for future annual re	port notifications)			
For further informati	on concerning this ma	tter, please call:			
Thomas J. Dobbin	s	at (352) 369-	-8830		
(Name of Conta	act Person)		time Telephone Number)	-	
Enclosed is a check f	for the following amou	int:		SECATALLA	وبت
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	SECRETARY OF SALLAHASSEE, FI	İŢ
STREET ADDRES Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions	MAILING A Registration S Division of C P. O. Box 633 Tallahassee, 1	Section Corporations 27	3: 33 STATE LORIDA	

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.

Page 1 of 2	7A.S. 89
5. The plan of conversion has been approved in accordance with all applicable	e statutes.
date this document is filed by the Florida Department of State; <u>AND</u> 2) m date listed in the attached Articles of Organization, if an effective date is	oust be the same as the effective
(The effective date: 1) cannot be prior to date of receipt or filed date nor	more than 90 days after the
4. If not effective on the date of filing, enter the effective date:	
(Enter Name of Florida Limited Liability Company)	
Reel American, LLC	•
3. The name of the Florida Limited Liability Company as set forth in the atta	iched Articles of Organization:
(date of organization, formation or incorporation)	
on - March 21, 2000 July 14, 2006	5. charry, the name of the country)
First organized, formed or incorporated under the laws of Enter state or if a non II.	S. entity, the name of the country)
E	
general partnership, common law or business t	
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited	Lnortnership
1 instant 1 inhibit. Common and	MOB-3114
(Enter Name of Other Business Entity)	
1 instant 1 inhibit. Common and	MO6-3914

SECRETARY OF STATE

Signed this	8th	_ day of <u>October</u>	20 <u>14</u>	
Signature o	f Author	ized Representative of Lim	ited Liability Company:	
Signature of	`Authoria	zed Representative: S. Musikantow		
Printed Nam	e: Allen	S. Musikantow	Title: Manager	-
Signature(s)	on beha	If of Other Business Entity:	[See below for required signature(s).]	
Signature:	U			_
Printed Nam	e: Allen S	S. Musikantow	Title: Manager	· -
Signature: _				_
Printed Nam	e:		Title:	<u>.</u>
Signature: _				-
Printed Nam	e:		Title:	-
Signature: _				<u>.</u>
Printed Nam	e:		Title:	-
Signature: _	· · · · · · · · · · · · · · · · · · ·		Title:	-
Printed Nam	e:		Title:	•
Signature: _				-
Printed Nam	e:		Title:	-
<u>If Florida C</u>				
		n, Vice Chairman, Director, or s have not been selected, an In		
If Florida G Signature of		<mark>artnership or Limited Liabil</mark> i ral Partner.	ty Partnership:	
		artnership or Limited Liabili eneral Partners.	ty Limited Partnership:	
All others: Signature of	an author	ized person.		SE SE
Fees:				LAHAT LAHET 100 M
		onversion:	\$25.00	SEE -9
	for Flori fied Cop	da Articles of Organization:	\$125.00 \$30.00 (Optional)	<u>"</u> 9 7
	ficate of		\$5.00 (Optional)	108 108 108 108 108 108 108 108 108 108
		•		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:			
, ,			
Reel American, 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 prin	icipal office of the Limite	ed Liability Comp	pany is:
	·		
Principal Office Address:	Mailing Address:		
9110 NW Hwy 225A	9110 NW Hwy 225A		
Ocala, FL 34482	Ocala, FL 34482	······································	
ARTICLE III - Registered Agent, Registered (Office, & Registered Ag	ent's Signature:	
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 rec	rictored agent are:		
The name and the Florida street address of the reg	gistered agent are.	The con	
Trow & Dobbbins, P.A.		Ess P	
		ARE OCT	TEM
Name		利日	
1201 NE 14th Street		TARY	1
1301 NE 14th Street	D NOTE (II)	ELL CO	m
Florida street address (P.O. I	Box NOT acceptable)	~ ~ U	0
2 1	0.4.4 ~ 0	3: 34: STATE LORIBA	
<u>Ocala</u> City	FL 34470	72	
	Zip	≅⊒ W	

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)

Page 1 of 2

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	Allen S. Musikantow
<u>MOIX</u>	9110 NW Hwy 225A
	Ocala, FL 34482
	
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effective date is listed, the date mu	the date of filing: (OPTIONAlist be specific and cannot be more than five business of
CLE V: Effective date, if other than	the date of filing: (OPTIONAlist be specific and cannot be more than five business of
CLE V: Effective date, if other than effective date is listed, the date mu 0 days after the date of filing.)	the date of filing: (OPTIONAlist be specific and cannot be more than five business of
CLE V: Effective date, if other than effective date is listed, the date mu 0 days after the date of filing.)	the date of filing: (OPTIONAlist be specific and cannot be more than five business of
CLE V: Effective date, if other than effective date is listed, the date mu 0 days after the date of filing.) CLE VI: Other provisions, if any.	the date of filing: (OPTIONAlist be specific and cannot be more than five business of
CLE V: Effective date, if other than effective date is listed, the date mu 0 days after the date of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mem In accordance with section 605.020 onstitutes an affirmation under the p	ber or an authorized representative of a member. 3 (1) (b), Florida Statutes, the execution of this documen enalties of perjury that the facts stated herein are true. submitted in a document to the Department of State
CLE V: Effective date, if other than effective date is listed, the date mu 0 days after the date of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a mem In accordance with section 605.020 onstitutes an affirmation under the paramaware that any false information onstitutes a third degree felony as provided the constitutes as the constitutes	ber or an authorized representative of a member. 3 (1) (b), Florida Statutes, the execution of this documen enalties of perjury that the facts stated herein are true. I submitted in a document to the Department of State rovided for in s.817.155, F.S.)

Page 2 of 2