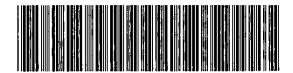
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•		
(Request	tor's Name)	
(Address)	
(Address	<u>)</u>	<u>.</u>
(City/Sta	te/Zip/Phone #)	
PICK-UP] WAIT	MAIL
(Busines	s Entity Name)	
(Docume	ent Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filing	Officer:	

Office Use Only



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JUN 1 2 2017 Y SÜLKER

COVER LETTER

TO: Registration Division of	n Section Corporations		
SUBJECT: M1 M		111 12 11 118 C	
	Name of Florid	la Limited Liability Compa	ny
	les of Conversion and Company" into an "Oth	• •	
Please return all co	rrespondence concerni	ng this matter to:	
Bruce Brashear			
	Contact Person		
Brashear & Assoc	iates, PL		
	Firm/Company		
925 NW 56th Ter,	Suite C		
	Address		
Gainesville Florida	a		
	City, State and Zip Code		
	com o be used for future annual tion concerning this ma		
	Jon Concerning and In-		
Bruce Brashear Name of Contact	n		336-0800
Name of Contact	rerson	Area Code and Da	ytime Telephone Number
Enclosed is a check	for the following amo	unt:	
\$25.00 Filing Fee	☐ \$30.00 Filing Fee and Certificate of Status	□\$55.00 Filing Fee and Certified Copy	☐ \$60.00 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRE	SS:	MAILING.	ADDRESS:
Registration Section	า	Registration	
Division of Corpora	ntions		Corporations
Clifton Building	O	P. O. Box 63	
2661 Executive Cer		Tallahassee,	FL 32314
Tallahassee, FL 32	201		

CR2E106 (07/14)

Articles of Conversion For Florida Limited Liability Company Into "Converted or Other Business Entity"

The Articles of Conversion is submitted to convert the following Florida Limited Liability Company into an "Other Business Entity" in accordance with s. 605.1045, Florida Statutes.

1. The name of the Florida Limited Liability Company converting into the "Other Business Entity" is:
MI MUSIC GROUP, HC Enter Name of Florida Limited Liability Company
Enter Name of Florida Limited Liability Company
2. The name of the "Converted or Other Business Entity" is:
M1 Music Group He
Enter Name of "Converted or Other Business Entity"
3. The "Converted or Other Business Entity" is a Limited Liability Congains (Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)
organized, formed or incorporated under the laws of Michigan (Enter state, or if a non-U.S. entity, the name of the country)
On (Date of organization, formation or incorporation)
and the formation document is attached (if applicable).
4. The plan of conversion was approved by the converting Florida Limited Liability Company in accordance with Chapter 605, F.S.
5. This conversion shall be effective in Florida on: (The effective date: 1) cannot be prior to 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 of the conversion under the laws governing the "Other Business Entity.")
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

605.0117 and Ch	•	
Street Address:	9693 BUSNING TREE PRIVE	
	GRAND BLANC, MI 48439	
Mailing Address:	9693 BUINING TREE PRIVE GRAND BLANC, MI 48439 9693 BUINING TREE DRIVE GRAND BLANC, MI 48439	_
	GRAND BLANC, MI 48439	
	her Business Entity" has agreed to pay any members having	
	nount to which such members are entitled under ss. 605.1006	
appraisal rights the an and 605,1061-605,107 Signed this 38	72, F.S.	_
and 605.1061-605.107	72, F.S.	_
and 605.1061-605.107	2, F.S.	- 1866 - 1866
and 605.1061-605.107 Signed this 28 Signature:	day of	SCCAE)
and 605.1061-605.107 Signed this 28	2, F.S.	SECALIAN IALL SHARE
and 605.1061-605.107 Signed this 28 Signature: Printed Name: 44 Fees: Filing Fee:	day of	SEUNETARY C
and 605.1061-605.107 Signed this 28 Signature: Printed Name: 14 Fees: Filing Fee: Certified Copy:	Must be signed by a Member or Authorized Representative Authorized Title: Manager \$25.00 \$30.00 (Optional)	SECRETARY DE
and 605.1061-605.107 Signed this 28 Signature: Printed Name: 44 Fees: Filing Fee:	Must be signed by a Member or Authorized Representative Authorized Title: Manager \$25.00 \$30.00 (Optional)	SECRETARY DESTA