# L15000191230

(Re	questor's Name)	
(Ad	dress)	
(Au	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
	siness Entity Nar	ma)
(Bu	Silless Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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SECRETARY OF THE TALLAHASSEE TO PM 1: 22

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# **COVER LETTER**

то:	Registration S Division of C					
SUBJ	ECT: AGEWYZ	Z MEDIA GROUP LLC				
		(Name	of Resulting Floric	a Limited	d Company)	
					d fees are submitted to convert are ecordance with s. 605.1045, F.S.	ı "Other
Please	return all corre	espondence concerning	g this matter to:			
Jana Pa	ınarites					
		(Contact Person)		_		
Agewy	z Media Group Ll	C				
		(Firm/Company)		_		
155 Au	burn Drive					
		(Address)				
Lake V	Vorth, Florida 334	60				
	(0	City, State and Zip Code)		_		
jana.pa	narites@gmail.co	m				
E-m	iail Address: (to be	e used for future annual rep	port notifications)	_		
For fu	rther informatio	on concerning this mat	ter, please call:			
Jana Pa	inarites		at ( <sup>323</sup>	627-8	3205	
	(Name of Conta	et Person)	(Area Code	(Day	rtime Telephone Number)	
Enclos	sed is a check for	or the following amou	nt:			
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles nization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Regist Divisi Cliftor 2661 I	ET ADDRESS ration Section on of Corporati n Building Executive Center assee, FL 3230	ons er Circle	Regist Divisi P. O. 1	ration S on of C Box 632	Corporations	

INHS11 (06/15)

### **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.

Agewyz Media Group LLC	(Enter Name of Other Business Entity)	
2. The "Other Business Entity"	" is a Limited Liability Company .	
•	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
First organized, formed or inco	orporated under the laws of Virginia	<b>3</b> F
December 8, 2014	reporated under the laws of (Enter state, or if a non-U.S. entity, the na	me of the county)
(date of organization, formation of	or incorporation)	ARY ASSE
3. The name of the Florida Lin	nited Liability Company as set forth in the attached Article	es of Organization:
Agewyz Media Group LLC		1:22
(Enter N	Name of Florida Limited Liability Company)	22 22
4. If not effective on the date of	of filing, enter the effective date:	
date this document is filed by date listed in the attached Ar	t be prior to date of receipt or filed date nor more than 9 the Florida Department of State; <u>AND</u> 2) must be the saticles of Organization, if an effective date is listed thereing the does not meet the applicable statutory filing requirements, this date was warring of State's records.	ame as the effective n.)
5. The plan of conversion has b	been approved in accordance with all applicable statutes.	

Page 1 of 2

Signed this 3rd day of	of November	20_15
Signature of Authorized R	epresentative of Lin	nited Lability Company:
Signature of Authorized Rep Printed Name: Jana Panarites	presentative:	Mile: Member
Signature(s) of behalf of Ot	ther Business Entity:	[See below for required signature(s)]
Signature: For F	nny	
Printed Name: Jana Panarites		Title: Member
Signature:		
Printed Name:		Title:
C'		
Signature: Printed Name:		Title:
Timed italie.		
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		TO 1.1
Printed Name:		Title:
If Florida Corporation:		
Signature of Chairman, Vice		
If Directors or Officers have i	not been selected, an I	ncorporator must sign.
If Florida General Partners	hin ar Limited Lighi	lity Partnershin:
Signature of one General Part	ner.	nty 1 at the romp.
_		
If Florida Limited Partners		lity Limited Partnership:
Signatures of <u>ALL</u> General P	artners.	
All others:		
Signature of an authorized pe	rson.	
Fees:		
➤ Articles of Conversion	on.	\$25.00
Fees for Florida Artic		\$125.00
Certified Copy:	<b>5</b>	\$30.00 (Optional)
Certificate of Status:		\$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

Agewyz Media Group LLC	
(Must end with the words "Lim	ted 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:
155 Auburn Drive	155 Auburn Drive
Lake Worth, Florida 33460	Lake Worth, Florida 33460
ARTICLE III - Registered Agent, Re	gistered Office, & Registered Agent's Signature:
ARTICLE III - Registered Agent, Re The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature:
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address  Jana Panarites  155 Auburn Drive	of the registered agent are:  Name  Registered Agent's Signature:  Name  Registered Agent's Signature:  Name  Registered Agent are:  Name
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address  Jana Panarites  155 Auburn Drive	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another of the registered agent are:  Name  Name

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

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to or 90 days after the date of filing.)

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.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Jana Panarites

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)

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