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Certified Copies	Certificates	of Status
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COVER LETTER

Division of C				
SUBJECT: Steven Ba	lusik Consulting LLC		•	
SUBJECT.		ulting Florida Limite	ted Company)	
Business Entity" into	a "Florida Limited Lis	ability Company'	ion, and fees are submitted to convert an "y" in accordance with s. 605.1045, F.S.	Othe
Please return all corre	espondence concerning	g this matter to:		
David Rodrigues CPA				
	(Contact Person)		-	
David Rodrigues CPA Pa	\		_	
	(Firm/Company)		_	
101 N Missouri Ave			_	
	(Address)			
Clearwater, FL 33755				
((City, State and Zip Code)		-	
drodrigues123@yahoo.c			_	
E-mail Address: (to b	e used for future annual re	port notifications)		
For further informati	on concerning this ma	tter, please call:		
David Rodrigues		at (⁷²⁷	439-0089	
(Name of Conta	act Person)) (Daytime Telephone Number)	
	for the following amou		processed by this office must be payable in	n US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		
STREET ADDRES Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 323	ions er Circle	Registra Division P. O. B	ration Section on of Corporations Box 6327 assee, FL 32314	

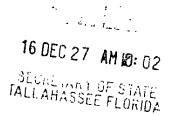
Articles of Conversion

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: Premier Net Clicks The. (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Coros ration (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Forida (Enter state, or if a non-U.S. entity, the name of the country)
on 08/08/2008 (Enter state, or if a non-U.S. entity, the name of the country) (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Steven Balusik Consulting LLC
(Enter Name of Florida Limited Liability Company) 4. If not effective on the date of filing, enter the effective date: 0/0/2017 (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.) 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.
5. The plan of conversion has been approved in accordance with all applicable statutes.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.

Signed this 20 day of December	20_16
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Steven M Balusik	Title: AMBR
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Printed Name Sterea M Balusik	Title: MR, P
Signature:Printed Name:	Title:
Signature:Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	Officer. corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL 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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Steven Balusik Consulting 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:	
914 Carlton Road PO Box 2072	
Tarner Serings Tarner Sorings	
FL 34689 1 FL 34688 1	
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:	
Steven M Balusik	
<u> </u>	
914 Carlton Road Florida street address (P.O. Box NOT acceptable) Trans Carlton Road 2110 Carlton Road	
Florida street address (P.O. Box NOT acceptable)	
Thron Springs FL 34689	
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 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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
MGR" = Manager	Steven M Balusik 914 Cartton Road Taron Springs FL 34689
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(Use attachment if necessary)	
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FICLE V: Effective date, if other than the n effective date is listed, the date must 90 days after the date of filing.) If the date inserted in this block does not meet to	the applicable statutory filing requirements, this date will not be listed a
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TICLE V: Effective date, if other than the an effective date is listed, the date must r 90 days after the date of filing.) If the date inserted in this block does not meet to the insert of the date on the Department of State's TICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member This document is executed in act I am aware that any false inform constitutes a third degree felony. Steven	the applicable statutory filing requirements, this date will not be listed as records. For an authorized representative of a member. ecordance with section 605,0203 (1) (b), Florida Statutes. sation submitted in a document to the Department of State as provided for in s.817.155, F.S.
TICLE V: Effective date, if other than the an effective date is listed, the date must r 90 days after the date of filing.) If the date inserted in this block does not meet to the iment's effective date on the Department of State's TICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member This document is executed in act I am aware that any false inform constitutes a third degree felony Steven M Typ	the applicable statutory filing requirements, this date will not be listed as records. Total authorized representative of a member. ecordance with section 605,0203 (1) (b), Florida Statutes, aution submitted in a document to the Department of State as provided for in s.817.155, F.S.

Page 2 of 2

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-