L17000141153

(Requestor's Name)
(requestors reame)
(Address)
(Address)
(City/State/Zip/Phone #)
(,,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(
Certified Copies Certificates of Status
Certificates of Status
Special Instructions to Filing Officer.

Office Use Only



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T. BURCH

T. BURCH JUN 3 0 2017

COVER LETTER

TO: New Filing S Division of C				
SUBJECT: News Co	nnection USA, LLC			
	(Name of Res	sulting Florida Limit	ed Con	ipany)
				d fees are submitted to convert an "Othe coordance with s. 605,1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
Charles W. Bone				
	(Contact Person)			
Bone McAllester Norton				
	(Firm/Company)			
511 Union Street, Suite	1600			
	(Address)			
Nashville, TN 37219				
(1	City, State and Zip Code)	7		
cbone@bonelaw.com				
E-mail Address: (to b	e used for future annual re	port notifications)		
For further informati	on concerning this ma	tter, please call:		
Charles W. Bone		_at (<u>615</u>) 238-6	310
(Name of Conti	ict Person)	(Area Code)	(Day	time Telephone Number)
	or the following amou a bank located in the		rocess	ed by this office must be payable in 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		☐\$185,00 Filing Fees. Certified Copy, and Certificate of Status
STREET ADDRES New Filing Section	S:	MAIL New Fi		DDRESS:
Division of Corporat	ions			orporations
Clifton Building	<i>(</i>): 1	P. O. B		
2661 Executive Cent	er Circle	Tatlaha	ssee. l	41, 32314

Tallahassee, FL 32301

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: News Connection USA, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
(Enter entity type: Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
October 14, 1999 Oil
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
News Connection USA, 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 calendar days after the date this document is filed by the Florida Department of State; <u>AND</u> 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.

th	-7
Signed this All day of Thre	20 / /
Signature of Authorized Representative of Liny	ited Liability/Company:
Signature of Authorized Representative:	/ // Y/X
Printed Name: Charles W. Bone	Title: Member
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
100/2	
Signature: Charles W. Bone	
Timed Name. Same	Title.
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Cianotura	
Signature:Printed Name:	Title:
	·
Signature:	That
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In-	corporator must sign.
If Florida General Partnership or Limited Liabili	ty Partnership
Signature of one General Partner.	ry rathership.
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
Signatures of ACLE General Farmers.	
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the	ame: Limited Liability Comp	any is:
News Connection U	JSA, LLC	
•	Must contain the words "Limited	d Liability Company, "L.L.C.," or "LEC.")
ARTICLE II - /	Addrose	
, -		f the principal office of the Limited Liability Company is:
C		
Principal Office	Address:	Mailing Address:
9402 East US 92		PO Box 638
Suite 106	 -	Seffner, FL 33583
Tampa, FL 33610		
(The Limited Liability business entity with a	Company cannot serve as its over a ctive Florida registration.)	istered Office, & Registered Agent's Signature: on Registered Agent, You must designate an individual or another of the registered agent are:
(The Limited Liability business entity with a	Company cannot serve as its over a ctive Florida registration.)	vn Registered Agent, You must designate an individual or another
(The Limited Liability business entity with a	Company cannot serve as its over a ctive Florida registration.) e Florida street address of	vn Registered Agent, You must designate an individual or another
(The Limited Liability business entity with a	Company cannot serve as its over a ctive Florida registration.) e Florida street address of	on Registered Agent, You must designate an individual or another of the registered agent are:
(The Limited Liability business entity with a	Company cannot serve as its over a ctive Florida registration.) e Florida street address of Edward Graves 9402 East US 92, Suite 1	on Registered Agent, You must designate an individual or another of the registered agent are:
(The Limited Liability business entity with a	Company cannot serve as its over a ctive Florida registration.) e Florida street address of Edward Graves 9402 East US 92, Suite 1	on Registered Agent. You must designate an individual or another of the registered agent are: 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)

ARTICLE IV-

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

	Name and Address: zed Member
"MGR" = Manager	
MGR	Edward Graves
	9402 East US 92, Suite 106
	Tampa, Fl. 33610
AMBR	Charles W. Bone
	511 Union Street, Suite 1600
	Nashville, TN 37219
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(Use attachment if no	ecessary)
LE V: Effective date	
ffective date is listed days after the date of the date inserted in this bl	plock does not meet the applicable statutory filing requirements, this date will not be l Department of State's records.
ffective date is listed days after the date (the date inserted in this bl 's effective date on the D	d, the date must be specific and cannot be more than five business d of filing.) block does not meet the applicable statutory filing requirements, this date will not be l Department of State's records.
fective date is listed days after the date (he date inserted in this bl's effective date on the D	d, the date must be specific and cannot be more than five business d of filing.) block does not meet the applicable statutory filing requirements, this date will not be l'Department of State's records. ions, if any.
fective date is listed days after the date of he date inserted in this bles of the fective date on the DLE VI: Other provisional REQUIRED SIGNA	d, the date must be specific and cannot be more than five business d of filing.) block does not meet the applicable statutory filing requirements, this date will not be l'Department of State's records. ions, if any.
ffective date is listed days after the date of the date inserted in this blows after the provision of the Date of	d, the date must be specific and cannot be more than five business d of filing.) block does not meet the applicable statutory filing requirements, this date will not be led Department of State's records. ions, if any.

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)

Charles W. Bone