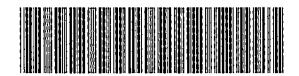
L18000000755

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

Office Use Only



300307057243

12/29/17--01017--011 **190.00

FILED

DEC 29 PM 3: 23

COVER LETTER

Division of C			
SUBJECT: Diversity	Inc Media. LLC		
		sulting Florida Limited	Company)
			and fees are submitted to convert an "Othen accordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:	
George F.A. Parnell			
	(Contact Person)		
DiversityInc Media, LLO			
	(Firm/Company)		
POB 348			
	(Address)		
Princeton, NJ 08542			
()	City, State and Zip Code)		
gparnell@diversityinc.co	om		
E-mail Address: (to b	e used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	
George F.A. Parnell		_at ()_4"	94-0503
(Name of Conta	act Person)	(Area Code) (Daytime Telephone Number)
	or the following amou		essed 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 Fee and Certified Copy	es
STREET ADDRES	S:	MAILING	G ADDRESS:
New Filing Section		New Filin	g Section
Division of Corporat	ions		f Corporations
Clifton Building 2661 Executive Cent	er Circle	P. O. Box	6327 ee. FL 32314
POOL PROGRAMME CAM	CI CHEIC	rananasst	V. L L. JEJ17

Tallahassee, FL 32301

Articles of Conversion For "Other Business Entity"

17 DEC 29 PM 3: 23

FILED

Into Florida Limited Liability Company

THAT THE ROAD

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: DiversityInc Media, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, e
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
July 11, 2001
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization
DiversityInc Media, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: [The effective date: Connect he prince to determine the date of filing and the file of the date of filing and the date of filing and the date of filing and the file of file of the date of filing and the da
(The effective date: 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.) 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 as the Days of State.
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	day of December	20_17
Signature of A	Authorized Representative of Lim	ited Liability Company:
Signatura of A	uthorized Representative:	- Visi
rimed Name	Lucas Visconti	I IIIe: Managing Member
1	1	[See below for required signature(s)]
Signature: $$	Mr / min	
Printed Name:		Title: Managing Member
Signature:		
Printed Name:_		Title:
Signature:		
Printed Name:_		Title:
Signatura		
Printed Name:		Title:
Timed Name		I itle:
Signature:		
Printed Name:		Title:
Trinco rame		Title:
Signature:		
Printed Name:		Title:
_		
If Florida Corr		
Signature of Ch	airman, Vice Chairman, Director, or	Officer.
If Directors or (Officers have not been selected, an In	corporator must sign.
		<u>-</u>
If Florida Gen	eral Partnership or Limited Liabil	ity Partnership:
Signature of one	e General Partner.	
16 Til 1 - 1 - 1 - 1	e an e e e e e e e e e e e e e e e e e e	
Li Florida Limi	ited Partnership or Limited Liabili	ty Limited Partnership:
Signatures of A	LL General Partners.	
All others:		
	authorized person.	
organical or an	admonzed person.	
Fees:		
Articles	of Conversion:	\$25.00
	Florida Articles of Organization:	
Certified		\$125.00
	ate of Status:	\$30.00 (Optional)
Certifica	aic of Status.	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:
Dispersie	
	yInc Media, LLC d Liability Company, "L.L.C.," or "LLC.")
	sament, sampling, states, d. 200.
ARTICLE II - Address: The mailing address and street address o	f the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
11! Reef Road	Diversitylne Media, LLC
Palm Beach, FL 33480	PO Box 348
	Princeton, NJ 08542
The name and the Florida street address of Kochman & Ziska, PLC/	•
Rochman & Ziska, PLC/	Name
222 Lakeview Avenue, S	Suite 1500
	ss (P.O. Box <u>NOT</u> acceptable)
West Palm Beach	Ft. 33401
City	Zip
liability company at the place design registered agent and agree to act in this statutes relating to the proper and con accept the obligations of my position	t and to accept service of process for the above stated limited nated in this certificate, I hereby accept the appointment as a capacity. I further agree to comply with the provisions of all applete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S

(CONTINUED)

A	R	T	Ī	\boldsymbol{C}	ĭ	F	1	V.
				٠.		F'.		

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
AMBR and MGR	Lucas Visconti	
	Eucas Viscoini	-
		-
		-
		_
		_
		_ •
		∌ 1
		=;
		
	[4 4] - C	
		3 5
		ò
		2 2
(Use attachment if necessary)	r.	•
TOT DAY OF		
TICLE V: Other provisions, if any.		
		
	· · · · · · · · · · · · · · · · · · ·	
REQUIRED SIGNATURE:		
Mr. Vann		
Signature of a member or a	in authorized representative of a member	-
This document is executed in accordance v	with section 605 0203 (1) (b) Florida Statutes, Lam augus a	hat
as provided for in s.817.155, F.S.	nent to the Department of State constitutes a third degree fel	опу
	Lucas Visconti	_
Тур	ed 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)