1180036532

(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

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CT Corp.

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date: 02/12/2018

		Acc#I20160000072	SMI
Name:	Bronco B	Billing, Inc.	
Document #:			
Order #:	1083701	2	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of Reinstatement			D(4
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	18 FEB 12 A
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Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amou	unt: \$ 180	

Thank you!

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Bronco Billing, LLC	
(Name of F	Resulting Florida Limited Company)
	ticles of Organization, and fees are submitted to convert an "Other Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concern	ing this matter to:
(Contact Person)	
(Firm/Company)	
(Address)	
(City, State and Zip Code	2)
E-mail Address: (to be used for future annual	
For further information concerning this r	
(Name of Contact Person)	at () (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following am dollars and drawn on a bank located in the	nount: (All checks processed by this office must be payable in US he United States)
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) ■ \$150.00 Filing Fee and Certificate of Status	and Certified Copy S185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Articles of Conversion

or

"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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:

Bronco Billing Inc.	<u> </u>
(Enter Name of Ot	her Business Entity)
2. The "Other Business Entity" is a 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 t	he laws of
	(Enter state, or if a non-U.S. entity, the name of the country)
November 21, 2013	
on (date of organization, formation or incorporation)	
	ompany as set forth in the attached Articles of Organization:
Bronco Billing, LLC	
(Enter Name of Florida Lin	nited Liability Company)
4. If not effective on the date of filing, enter th	e effective date:
(The effective date: Cannot be prior to date the date this document is filed by the Florida	of receipt or filed date nor more than 90 calendar days after a Department of State.) c applicable statutory filing requirements, this date will not be listed as the
5. The plan of conversion has been approved in	accordance with all applicable statutes.
6. The "Converted or Other Business Entity" has which such members are entitled under ss. 60.	agreed to pay any members having appraisal rights the amount to 5.1006 and 605.1061-605.1072, F.S.

Signed this 12th day of February	20_18	
Signature of Authorized Representative of Limit	ted Liability Company:	
Signature of Authorized Representative: Printed Name: Matthew Gatto	Title: Authorized Representative	-
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]	
Signature: Mash Satto Printed Name: Matthew Gatto	Title: Director	_ _
Signature:Printed Name:		_ _
Signature:Printed Name:	_ Title:	_ _
Signature:Printed Name:	_ Title:	
Signature:Printed Name:	_ Title:	_ _
Signature:Printed Name:	Title:	_ _
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.		
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		18 FE
Fees:		15 EB 12 F
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	112 MH 8: 26

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	'is:	
Bronco Billing, LLC		
(Must contain the words "Limited Lia	ability Company, "L.L.C.," or "L.L.C.")	
ARTICLE II - Address:		
The mailing address and street address of the	e principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
371 S. Federal Highway	371 S. Federal Highway	
Pompano Beach, Florida 33062	Pompano Beach, Florida 33062	
The name and the Florida street address of t CT Corporation System N	he registered agent are:	
1200 South Pine Island Roac	a	
	P.O. Box <u>NOT</u> acceptable)	
Pine Island Road	FL 33324	
City	Zip	
liability company at the place designate registered agent and agree to act in this castatutes relating to the proper and complace accept the obligations of my position as	nd to accept service of process for the above stated limit ed in this certificate. I hereby accept the appointment as upacity. I further agree to comply with the provisions of lete performance of my duties, and I am familiar with an s registered agent as provided for in Chapter 605, F.S Angel Shearer, Assistant Secretary Signature (REQUIRED)	all

(CONTINUED)

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Α.	n	•	ı	v	L	4	Γ.		•	-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Luck by Chitanana dista HaldCo. LLC
AMBR	Insight - CR Intermediate HoldCo. LLC
	1114 Avenue of the Americas, 36th Floor
	New York, NY 10036
	A CONTRACTOR OF THE CONTRACTOR
	<u> </u>
	±t,
	
	<u></u>
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
<i>5,</i> 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	
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DEMINDED SIGNATUDE.	
REQUIRED SIGNATURE:	Matha 2 - M
	1 DN 10 1 277
Signature of a member of	r an authorized representative of a member
This document is executed in accordance	ce with section 605.0203 (1) (b), Florida Statutes. I am aware thument to the Department of State constitutes a third degree felo
any taise information submitted in a doc as provided for in s.817.155, F.S.	ument to the Department of State constitutes a time degree ten
as provided for in 3.017.100.11.0.	
Matthew Gatto	
	yped or printed name of signee
•	The of Mine of Mane

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)