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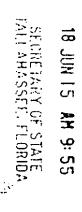
| (Requestor's Name) |
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| (Address) |
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| (Address) |
| 9 (City/State/Zin/Phone #) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| TO: | New Filing Se Division of Co | | | | |
|--------------------------------------|---|---|--|----------------------|---|
| | | • | | | |
| SUBJ | ECT: Bird's Eye | (Name of Res | ulting Florida Limite | d Com | pany) |
| | | of Conversion, Articl | es of Organizatio | n, and | d fees are submitted to convert an "Other cordance with s. 605.1045, F.S. |
| Please | return all corre | spondence concerning | g this matter to: | | |
| Seth K | Herman | | | | |
| | | (Contact Person) | | | |
| Bird's I | Eye Filming, LLC | | | | |
| | | (Firm/Company) | | | |
| 238 Ce | zanne Circle | | | | |
| | | (Address) | | | |
| Ponte V | /edra, FL 32081 | | | | |
| | (C | ity, State and Zip Code) | | | |
| seth.he | rman@birdseyefil | ming.net | | | |
| E-m | ail Address: (to be | used for future annual rep | port notifications) | | |
| For fu | rther informatio | on concerning this mat | ter, please call: | | |
| Seth K | . Herman | | _at (⁹¹⁰) | 368-8 | |
| | (Name of Contact | ct Person) | (Area Code) | (Dayı | time Telephone Number) |
| | | or the following amou a bank located in the l | • | ocess | ed by this office must be payable in US |
| (\$25 fo & \$125 | 0.00 Filing Fees r Conversion for Articles nization) | □\$155.00 Filing Fees and Certificate of Status | ■\$180.00 Filing I and Certified Copy | | ☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status |
| New F Divisi Cliftor 2661 F | ET ADDRESS filing Section on of Corporation Building Executive Center assee, FL 3230 | ons er Circle | New Fil Divisior P. O. Bo | ing Se of Cox 632 | orporations |

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

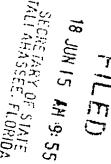
The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Bird's Eye Filming, LLC |
|--|
| (Enter Name of Other Business Entity) |
| 2. The "Other Business Entity" is a limited partnership (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) |
| 28 July 2017 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: |
| Bird's Eye Filming, LLC |
| (Enter Name of Florida Limited Liability Company) |
| 4. If not effective on the date of filing, enter the effective date: |
| (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 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 11th day of June | 20 <u>17</u> |
|---|-----------------------------|
| Signature of Authorized Representative of Limit | ed Liability Company: |
| Signature of Authorized Representative: 45th Cu. | s handow |
| Printed Name: Seth K. Herman | Title: Member |
| Signature(s) on behalf of Other Business Entity: [S | |
| | |
| Signature: Melisso C. Del | mon |
| Printed Name: Melissa C. Herman | Title: Organizer and Member |
| Signature: | |
| Printed Name: | Title: |
| Cianatura | |
| Signature:Printed Name: | Title: |
| | |
| Signature:Printed Name: | T:1 |
| Printed Name: | I itle: |
| Signature: | |
| Signature:Printed Name: | _ Title: |
| 6. | |
| Signature:Printed Name: | Title: |
| Timed (vane | |
| If Florida Corporation: | |
| Signature of Chairman, Vice Chairman, Director, or | |
| If Directors or Officers have not been selected, an Inc | corporator must sign. |
| If Florida General Partnership or Limited Liabilit | ty Partnership: |
| Signature of one General Partner. | |
| | |
| If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners. | ty Limited Partnership: |
| Signatures of ADE General Cardiers. | |
| 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

| m: 11 P PE : 11 C | |
|---|--|
| Bird's Eye Filming, LLC (Must contain the words "Limited Liat | bility Company, "L.L.C.," or "LLC.") |
| 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: |
| 238 Cezanne Circle | 238 Cezanne Circle |
| Ponte Vedra, FL 32081 | Ponte Vedra, FL 32081 |
| The name and the Florida street address of the Melissa C. Herman | he registered agent are: |
| | |
| | lame |
| 238 Cezanne Circle | |
| | (P.O. Box NOT acceptable) |
| Ponte Vedra | FL 32081 |
| City | Zip |
| liability company at the place designate registered agent and agree to act in this constatutes relating to the proper and complete. | and to accept service of process for the above stated limited ted in this certificate, I hereby accept the appointment as apacity. I further agree to comply with the provisions of all lete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S. |
| Registered Agent's | Signature (REQUIRED) A Signature (REQUIRED) |
| | |

ARTICLE IV-

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 AMBR | Melissa C. Herman | | | | |
| AMBR | 238 Cezanne Circle | | | | |
| | Ponte Vedra, FL 32081 | | | | |
| | Fonce Vedia, FL 32081 | | | | |
| AMBR | Seth K. Herman | | | | |
| | 238 Cezanne Circle | | | | |
| | Ponte Vedra, FL 32081 | | | | |
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| (Use attachment if necessary) | | | | | |
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| LE V: Other provisions, if any. | 콘걸 | | | | |
| DE V. Other provisions, it any. | | | | | |
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| | | | | | |
| REQUIRED SIGNATURE: | | | | | |
| required signature: | W | | | | |
| Signature of a member or This document is executed in accordance any false information submitted in a document in | r an authorized representative of a member see with section 605.0203 (1) (b), Florida Statutes. I am aware tument to the Department of State constitutes a third degree fel | | | | |
| Signature of a member or This document is executed in accordance | r an authorized representative of a member ee with section 605.0203 (1) (b), Florida Statutes. I am aware t | | | | |
| Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Seth K. Herman | r an authorized representative of a member se with section 605.0203 (1) (b), Florida Statutes. I am aware tument to the Department of State constitutes a third degree fel | | | | |
| Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. Seth K. Herman | r an authorized representative of a member ee with section 605.0203 (1) (b), Florida Statutes. I am aware t | | | | |

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)