# L18000180486

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
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Office Use Only



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#### **COVER LETTER**

TO: New Filing Section

71

Division of Corporations

TENFOLD MEDIA LLC SUBJECT: \_\_\_\_\_ (Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

DESHPYAR SINGH JASUJA
(Contact Person)
(Firm/Company)
2900 NE 7th Ave #4001
(Address)
Miami, FL 33137
(City, State and Zip Code)
Desh@Deshpyar.com
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

DESHPYAR SINGH JASUJA

(Name of Contact Person)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

■ \$150.00 Filing Fees (\$25 for Conversion

□\$155.00 Filing Fees and Certificate of

\$180.00 Filing Fees and Certified Copy

**□\$185.00** Filing Fees. Certified Copy, and

& \$125 for Articles

Status

Certificate of Status

of Organization)

## 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**

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.

The name of the "Other Business Entity" immediately pri  TENFOLD MEDIA LLC	or to the filing of the Articles of Conversion is:
(Enter Name of Other Business En	tity)
2. The "Other Business Entity" is a LIMITED LIABIL	
(Enter entity type. Example: corporation, limited partners	ship, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of _ (Ent	New York State
	state, or if a non-U.S. entity, the name of the country)
on FEBRUARY 15, 2018 (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as se	t forth in the attached Articles of Organization:
TENFOLD MEDIA LLC	
(Enter Name of Florida Limited Liability Co	ompany)
4. If not effective on the date of filing, enter the effective date	
(The effective date: Cannot be prior to date of receipt or the date this document is filed by the Florida Departmen Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records.	t of State.)
5. The plan of conversion has been approved in accordance v	vith all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay which such members are entitled under ss. 605.1006 and 605	

Signed this 20th day of July			
Signature of Authorized Representative of Limi	tel Liability Company:		
Signature of Authorized Representative:  Printed Name: DESHPYAR SINGH JASUJA	$\mathcal{T}$		
Drinted Name DESHDVAD SINGH IASILIA	Tide: Managing Member		
Frinced Name DESTIF TAN SINOTI SASOSA (	Z True		
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)		
Signature: Printed Name: DESHPYAR SINGH JASUJA			
Printed Name: DESHPYAR SINGH JASUJA	Title: Managing Member		
Signature:			
Printed Name:	Title:		
Signature:			
Signature:Printed Name:	_ Title:		
Signature:			
Signature:Printed Name:	Title:		
Signature:Printed Name:			
Printed Name:			
Clanatura			
Signature:Printed Name:	Title		
Timed Name.			
If Florida Corporation:			
Signature of Chairman, Vice Chairman, Director, or	Officer.		
If Directors or Officers have not been selected, an Inc	corporator must sign.		
If Planida Cananal Dantmanskin on Limited Linkili	to Doute anaking		
If Florida General Partnership or Limited Liabili Signature of one General Partner.	v Farthership.		
Signature of one General Farmer.			
If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:		
Signatures of <u>ALL</u> General Partners.			
All others:			
Signature of an authorized person.			
Signature of an administration personn			
<u>Fees:</u>			
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

ARTICLE 1 - Name: The name of the Limited Liability Company is:			
TENFOLD MEDIA LLC			
(Must contain the words "Limited Liability	Company, "L	.L.C" or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the print	ncipal offi	ce of the Limite	d Liability Company is:
Principal Office Address:	Mailing	Address:	
2900 NE 7th Ave #4001	2900	NE 7th Ave #	4001
Miami, FL 33137	Miami,	FL 33137	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)			
The name and the Florida street address of the re	gistered a	gent are:	
DESHPYAR SINGH JA	SUJA		
Name	Name		
2900 NE 7th Ave #40	01		
Florida street address (P.O.	Box <b>NOT</b>	acceptable)	
Miami	FL	33137	
City		Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as regional Registered Agent's slight	this certific y. I furthe Yormance itered age	cate, I hereby acc r agree to comple e of my duties, ar nt as provided fo	cept the appointment as ly with the provisions of all nd I am familiar with and

## 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 MGR	DESHPYAR SINGH JASUJA				
MGR					
	2900 NE 7th Ave #4001 Miami, FL 33137				
	Whatti, 1 E 33137				
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(Use attachment if necessary)	ARC ARC				
	ANI SSE				
ADTICLE V. Other provisions, if any					
ARTICLE V: Other provisions, if any.					
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REQUIRED SIGNATURE:	′				
/ ),//	( )				
Signature of Joseph or of	d von recentative of a member				
This document is executed in accordance	at a thorized representative of a member win section 605.0203 (1) (b), Florida Statutes. I am aware that				
any false information submitted in a docu	nent to the Department of State constitutes a third degree felony				
as provided for in s.817.155, F.S.					
DESHPYAR SINGH.	JASUJA				

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)