118000269

(Ke	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	siness Entity Name)	
(00	siness Linky Name,	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Fiting Officer	
Opeciar mandedona to	r mig Omeen	
1		

Office Use Only

M. MOON AUG 22 2018



000316274660

08/21/16--01009--011 **155.00

18 AUS 21 AM 9: SECNO:

COVER LETTER

Division of C	orporations			
SUBJECT: STARLE	T FILMS, LLC			
Sebute 1.		ulting Florida Limite	d Com	npany)
		_		d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:		
BRUCE B HUBBARD				
	(Contact Person)			
HUBCO				
	(Firm/Company)			
238 WEST JERICHO T	URNPIKE			
	(Address)	-		
HUNTINGTON STATI	ON, NY 11746			
(1	City, State and Zip Code)			
KEVIN@FREESTYLE-	LA.COM			
E-mail Address: (to b	e used for future annual re	port notifications)		
For further informati	on concerning this ma	tter, please call:		
JOANN		_at (516	813-1	1187
(Name of Conta	ict Person)	(Area Code)	(Day	rtime Telephone Number)
	or the following amou a bank located in the		rocess	sed 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 Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRES New Filing Section Division of Corporat Clifton Building 2661 Executive Cent	ions	New Fil Division P. O. Bo	ling S n of C ox 632	Corporations

INHS11 (7/17)

Tallahassee, FL 32301

TO: New Filing Section

2 copies enclosed

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 STARLET FILMS, LLC	of Conver	sion is	s:
(Enter Name of Other Business Entity)			
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common	aw or busine	ess trus	t, etc.)
First organized, formed or incorporated under the laws of <u>CALIFORNIA</u> (Enter state, or if a non-U.S. entity, the na	ame of the co	untry)	
on 05/09/2011 (date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set forth in the attached Article	es of Orga	nizati	ion:
STARLET FILMS, 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 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 vidocument'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	amour	nt to

Signed this 18TH day of July	_ 20_18	
Signature of Authorized Representative of Limit	ted Liability Company:	
Signature of Authorized Representative: Printed Name: KEVIN CHINOY	Title: MGR	
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]	
Signature: Printed Name: KEVIN CHINOY	Title: MANAGER	
Signature: Bhc		
Printed Name: BLAKE ASHMAN-KIPERVASER	Title: MANAGER	
Signature: Printed Name: SEAN BAKER	Title: MANAGER	
Signature:Printed Name:	_ Title:	
Signature:Printed Name:		
Signature: Printed Name:	_ Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	Officer.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	y Limited Partnership:	
All others: Signature of an authorized person.		18 AUG 18 AUG \$1,5555
Fees:		2 2
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	MH 9:59

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

STA	ARLET FILMS, LLC
(Must end with the w	vords "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
400 ALTON ROAD, #411	400 ALTON ROAD, #411
MIAMI BEACH, FL 33139	MIAMI BEACH, FL 33139
	
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot so another business entity with an active Flo	stered Office, & Registered Agent's Signature: erve as its own Registered Agent. You must designate an individual or rida registration.)
The name and the Florida street address of	f the registered agent are:
KEVIN CHING	YC
	Name
400 ALTON F	ROAD, #411
Florida street add	iress (P.O. Box <u>NOT</u> acceptable)
MIAMI BEAC	H
	City Zip
the place designated in this certificate, capacity. I further agree to comply with	nd to accept service of process for the above stated limited liability company a I hereby accept the appointment as registered agent and agree to act in this the provisions of all statutes relating to the proper and complete performance d accept the obligations of my position as registered agent as provided for in Chapter 605, F.S
	Ke Ch .
Registered	Agent's Signature (REQUIRED)
	KEVIN CHINOY
	KEVIN CHINOY (CONTINUED)

<u>Fitle:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	KEVIN CHINOY
- WOTC	400 ALTON ROAD, #411
	MIAMI BEACH, FL 33139
MGR	BLAKE ASHMAN-KIPERVASER
	400 ALTON ROAD, #411
	MIAMI BEACH, FL 33139
MGR	SEAN BAKER
	400 ALTON ROAD, #411
	MIAMI BEACH, FL 33139
•	date of filing: (OPTIONAL)
E V: Effective date, if other than the ective date is listed, the date must lefflling.)	e date of filing: (OPTIONAL) De specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the ective date is listed, the date must lof filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	Tea Co
REQUIRED SIGNATURE: Signature of (In accordance with secondant any family and family an	a member or an authorized representative of a member.
E V: Effective date, if other than the ective date is listed, the date must lof filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with see constitutes an affirmat I am aware that any fa	a member or an authorized representative of a member. tion 605.0203 (1) (b), Florida Statutes, the execution of this document ion under the penalties of perjury that the facts stated herein are true. Ise information submitted in a document to the Department of State