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(Re	equestor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE

COVER LETTER

TO: New Filing S Division of O							
-	•						
SUBJECT: Block Isl				·	_		
	(Name of Res	sulting Florida Limite	ed Cor	npany)			
	es of Conversion, Artic o a "Florida Limited Li						'Other
Please return all corn	respondence concernin	g this matter to:					
Kenneth Schur							
	(Contact Person)	·					
Schur Productions Inc							
	(Firm/Company)						
2100 South Ocean Blvd	. 407S				₹		
	(Address)) SEC	8 0	
Palm Beach, FL 33480					27.E.I	18 DEC 14	1 }
(City, State and Zip Code)				SS	-	
kennethschur@gmail.co	m					2	П
E-mail Address: (to l	be used for future annual re	port notifications)) 18.	1: 2	
For further informat	ion concerning this ma	tter, please call:			35 C	22	
Kenneth Schur		_at (779-0	5739			
(Name of Cont	act Person)		(Day	vtime Telephone Number)			
	for the following amount a bank located in the		roces	sed by this office must	be paya	ıble iı	n 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	SS:	MAILI	NG /	ADDRESS:			
New Filing Section		New Fil	ling S	Section			
Division of Corporat	tions			Corporations			
Clifton Building		P. O. Bo	ox 63	Z1			

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

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.

(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of [Enter state, or if a non-U.S. entity, the name of the country)
August 17,2016
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Block Island Productions, 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.

	' '		
Signed this 14	day of December	20_18	
		Limited Liability Company:	
Signature of Author Printed Name: Kennet	rized Representative:	Title: AMBR	_
Signature(s) on beh	alf of Other Business Ent	ity: [See below for required signature(s)]	
Signature: Signature:	85/L		_
Printed Name: Kennet	th Schur	Title: AMBR	_ _
C:			
Drinted Mame:	<u> </u>	Title:	_
Timed Name		11dc	-
Signature:			_
Printed Name:		Title:	- -
C:			
Signature:		Title:	-
Printed Name:		Ittle:	
Signature:			FILED PROBASSION
Printed Name:		Title:	
			SER TIME
Signature:			- 79 至一
Printed Name:		Title:	- 46 - 0
-	t <mark>ion:</mark> an, Vice Chairman, Directo ers have not been selected, a		ED ED
		. 0	
If Florida General I Signature of one Ger	<mark>Partnership or Limited Li</mark> neral Partner.	ability Partnership:	
If Florida Limited I Signatures of ALL C		ability Limited Partnership:	
All others: Signature of an author	orized person.		

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Articles of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

Fees:

\$30.00 (Optional) \$5.00 (Optional)

Certified Copy: Certificate of Status:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AKTICLE I - IN			
The name of the	Limited Liability Company	y is:	
Block Island Produc	tions, LLC		
4)	Aust contain the words "Limited Li-	ability Company, "L.L.C.," or "	LLC.")
ARTICLE II - A	Address:		
The mailing addr	ess and street address of th	e principal office of the	Limited Liability Company is
Principal Office	Address:	Mailing Address:	<u>.</u>
2100 South Ocean B	lvd 407S	Same	
Palm Beach, FL 334	80		
The Limited Liability	Registered Agent, Registe Company cannot serve as its own F n active Florida registration.)		gnate an individual or another
The name and the	e Florida street address of t	the registered agent are:	SECRETARY SECOND IN
	Kenneth Schur		THE F
	N	ame	SEFF FI (Paris
	2100 South Ocean Blvd. 407	rs	700
	Florida street address (P.O. Box NOT acceptab	ole) Francisco
	Palm Beach, FL 33480	FL 33480	,
	City	Zip	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

'AMBR" = Authorized Member 'MGR" = Manager	
Kenneth Schur	Schur Productions, Inc.
	2100 South Ocean Blvd. 407S
	Palm Beach, FL 33480
Jon Adler Schur	Adler Films, Inc.
	419 Park Avenue South
	New York, New York 10016
	DV. O
	
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Use attachment if necessary)	
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LE V: Other provisions, if any.	SECTION OF
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LE V: Other provisions, if any.	
REQUIRED SIGNATURE: Signature of a member of	r an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	e with section 605.0203 (1) (b), Florida Statutes. I am aware
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a doc	e with section 605.0203 (1) (b), Florida Statutes. I am aware
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a doc as provided for in s.817.155, F.S. Kenneth Schur	e with section 605.0203 (1) (b), Florida Statutes. I am aware