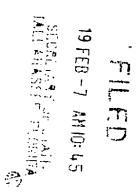


(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	-
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





01/16/19--01618--018 **i50.00



COVER LETTER

Division	_				
SURIFCT: F	14 By	Films, LLC			
30131.61		Name of Resi	ilting Florida Limite	d Com	pany)
The enclosed Ar Business Entity	ticles of into a	Conversion, Articl Florida Limited Lia	es of Organization ibility Company	n, and in ac	d fees are submitted to convert an "Othe cordance with s. 605.1045, F.S.
Please return all	corresp	ondence concerning	this matter to:		
Regina Rabitaille,	Esq.				
	(Contact Person)			
Nelson Mullins Br	oad and C	Cassel			
		Firm/Company)			
390 N. Orange Av	e., Ste. 14	00			
		(Address)			
Orlando, Florida 3	2801				
	(City	, State and Zip Code)			
regina.rabitaille@r	nelsonmu	llins.com			
E-mail Address	s; (to be u	sed for future annual rep	port notifications)		
For further infor	rmation	concerning this mat	ter, please call:		
Regina Rabitaille,	Esq.		_at (839-4	209
(Name of	Contact	Person)	(Area Code)	(Day	209 time Telephone Number)
		the following amou bank located in the		rocess	ed by this office must be payable in US
■ \$150.00 Filing (\$25 for Conversio & \$125 for Article of Organization)	on a	3\$155.00 Filing Fees and Certificate of tatus	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADD	RESS:		MAILI	NG A	ADDRESS:
New Filing Sec	-		New Fi	_	
Division of Cor	-	ns			Corporations
Clifton Building 2661 Executive		Circle	P. O. Bo Tallaha		27 FL 32314
-∠OOT EXCURRIVE	COMC	CHUIC	randha	.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4 Em

Tallahassee, FL 32301

Articles of Conversion

For

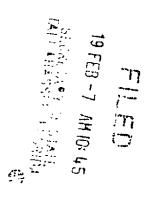
"Other Business Entity"

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

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: (Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Corporation	
(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)	
August 5, 2013 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: Fly By 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 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.	
and change and cost 1000 and 605,1061-605,1072, F.S.	



Signed this 8th day of January	20 19	
Signature of Authorized Representative of L.		
Signature of Authorized Representative:	and Hyadur Title: Manager	
Signatura(s) o= b.t. is so	3	-
Signature Signature Lindsay M. Hirschmann Signature Lindsay M. Hirschmann		
Signature	Title: President	
Signature: Printed Name:	Title	
Signature	ritie:	
Signature:Printed Name:	Title	
Signature:		
Signature:Printed Name:	Title:	
Signature:		
Signature:Printed Name:	Title:	
Signature:Printed Name:		
Printed Name:	Title:	哥里
If Florida Corneration:		FILED MOS
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not be	Officer,	
If Directors or Officers have not been selected, an Ir		<u> </u>
If Florida General Partnership or Limited Liabil Signature of one General Partner.	ity Partnership:	5 S
		PA TO
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:	
All others:		
Signature of an authorized person.		
Fees:		
Articles of Conversion:	\$25.00	
Fees for Florida Articles of Organization: Certified Copy:	\$125.00	
Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Lines	
The name of the Limited Liability Company is:	
ul sa	
Fly By Films LLC	
(Must contain the words of instead to the	
(Must contain the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing of the	
The maning address and street address of the pr	incipal office of the Limited Liability Company is:
	. Samuel Embining Company is:
Principal Office Address:	Mailing & J.J.
	Mailing Address:
1915 Lakemont Avenue, Unit 159	
Orlando, Florida 32814	1915 Lakemont Avenue, Unit 159
Strainabilit forfat 32814	Orlando, Florida 32814
	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its nwn Registered	O.C
(The Limited Liability Company cannot carry as its and B	Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re	
based address of the re	gistered agent are:
Lindam, M. III	
Lindsay M. Hirschmann	
Name	
1915 Lakemont Avenue. Unit 159	
Florida street address (P.O. 1	Box <u>NOT</u> acceptable)
α_{i}	
Orlando	_ FL_32814
City	Zip
•	•
Having been named as registered assure as 1.	
liability company at the state of a gent and to a	accept service of process for the above stated limited
admity company at the place designated in the	is certificate. I hereby accept the appointment as
registered agent and agree to act in this capacity	I see that is a second of the appointment as a second of the second of t
statutes relating to the proper and complete per	formance of my duties, and I am familiar with and
accept the obligations of my position as made	formance of my auties, and I am familiar with and
as regis	formance of my duties, and I am familiar with and tered agent as provided for in Chapter 605, F.S
De College III	(1)
1 MINIMENT TO	MADIMUL _
Registered Agent's Signati	ore (REQUIDED)
5 C Spignati	AAN AAN AAR AAR AAR AAR AAR AAR AAR AAR
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The name and address of each person authorized to manage and control the Limited Liability

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FICLE V: Other provisions, if any.			では、	į
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(Use attachment if necessary)		.T'	8	-
		- ;-	-	
		<u> </u>		
				
	Orando, 1 lorida 328/4			
	1915 Lakemont Avenue, Unit 159 Orlando, Florida 32814			
	Lindsay M. Hirschmann			
MGR	I fadam, St. tre.			
"AMBR" = Authorized Member "MGR" = Manager				
Title:	Name and Address:			

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony.

Typed or printed name of signee

Filing Fees

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