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



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### **COVER LETTER**

<b>TO:</b> New Filing Section Division of Corporations			
GMB Music L.L.C.			
SUBJECT:(Name of	Resulting Florida Lin	nited Company)	<del></del>
The enclosed Articles of Conversion, A Business Entity" into a "Florida Limited			
Please return all correspondence concer	ning this matter to	:	
Derek Trenholm			
(Contact Person) GMB Music Inc.		_	2021
(Firm/Company) 867 Bethany CT S		<u></u>	2021 HAR -2
(Address)		_	A-4
Fort Myers, FL 33919			PH 4: 10
(City, State and Zip Coo GMBMusicinfo@gmail.com	ie)		
E-mail Address: (to be used for future annu	al report notifications)		
For further information concerning this	matter, please call	:	
Derek Trenholm	239 at (	770-7890 )	
(Name of Contact Person)	(Area Cod	e) (Daytime Telephone	e Number)
Enclosed is a check for the following ar dollars and drawn on a bank located in	,	processed by this of	Tice must be payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  ☐ \$150.00 Filing Fee and Certificate of Status	es		y, and
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327		Street Address: New Filing Section Division of Corpo The Centre of Tall	rations
Tallahassee, FL 32314		2415 N. Monroe S	treet, Suite 810

Tallahassee, FL 32303

# **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.

GMB Music Inc.	<b>-</b> •
(Enter Name of Other Business Entity) S-Corporation	
·	
2. The "Other Business Entity" is a	on law or business trust, etc.)
First organized, formed or incorporated under the laws of	
First organized, formed or incorporated under the laws of	name of the country)
on(date of organization, formation or incorporation).	
(date of organization, formation or incorporation)	
(Enter Name of Florida Limited Liability Company) 03/18/2021	e.
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 5 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 document's effective date on the Department of State's records.	90 calendar days after
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 appraisable which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	sal rights the amount to
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	2021 MAR -2
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		day of February	20_2(			
٠,		orized Representative of Limi				
			~~			
Signat	ture of Autho	rized Representative:	Mitalta			
Printed	d Name: Derek	Trenholm	Title: President	-		
Signat	ture(s) on bel	half of Other Business Entity;	[See below for required signature(s)]			
Signat	1100 DL	Ahan Sellrul				
Printe	d Name: Heath	ner Holbrook	Title: President	-		
		eliotto the				
Signat	ure: Ocrah	Transfer	T'.1 Officer	-		
Printe	d Name: Derer	c Trenholm	Title: Officer	-		
Signat	ure:			_		
Printe	d Name:		Title:	-		
Signat	ure,					
Printe	d Name:		Title:	_		
Signat	ure:		Tido.	-		
Printe	u Name:		Title:	-		
Signat	ure:			<del>-</del>		
Printe	d Name:		Title:	_		
If Flo	rida Corpora	ition:				
		nan, Vice Chairman, Director, or	Officer.			
If Dire	ectors or Offic	eers have not been selected, an In-	corporator must sign.			
If Flo	rida General	Partnership or Limited Liabili	ty Partnershin:			
		eneral Partner.	<u>,                                     </u>			
		ns / 11 Y 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		•.	<b>~</b> 3	
		Partnership or Limited Liabili General Partners.	ty Limited Partnership:		2021 HAR -2	
O i g. i u i	dies of <u>Ikaza</u>	Concret 7 d. d. c. s.		7H420	ΙΛΉ	٠.
All ot				25.	~	-
Signat	ure of an auth	norized person.				
Fees:				- <del></del> -	PH	•
				-	01:4	
		Conversion:	\$25.00		0	
		orida Articles of Organization:	\$125.00 \$30.00 (Ontional)			
	Certified Co	• -	\$30.00 (Optional) \$5.00 (Optional)			
	Comments (	v. piuius.	45.00 (Opavilar)			

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
GMB Music L.L.C.	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	

### **ARTICLE II - Address:**

ARTICLE I - Name:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
GMB Music L.L.C	GMB Music L.L.C
867 Bethany CT S	867 Bethany CT S
Fort Myers, FL 33919	Fort Myers, FL 33919

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Derek Trenholm		<u>,</u>	2021	
	Name	∓7 ≥.	21 HAR	
867 Bethany CT S		<u> </u>	₹ -	
Florida street addres	ss (P.O. Box NOT acceptable)	<u>.</u>	$\sim$	
Fort Myers	33919 FL	<u></u>		1 1 - <del></del>
City	Zip	2	11 :11	أمرته

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:

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Derek Trenholm
	867 Bethany CT S
	Fort Myers, FL 33919
MGR	Heather Holbrook
	867 Bethany CT S
	Fort Myers, FL 33919
	200
<del></del>	
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•	
(Use attachment if necessary)	2. •
T. F. V. Other provisions, if any	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	an authorized representative of a member
REQUIRED SIGNATURE:  Signature of a member or	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes, I am aware t
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a docu	an authorized representative of a member e with section 605.0203 (1) (b), Florida Statutes. I am aware to the Department of State constitutes a third degree fel
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	e with section 605.0203 (1) (b), Florida Statutes. I am aware t
REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance any false information submitted in a docu	e with section 605.0203 (1) (b), Florida Statutes. I am aware t

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)