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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE
TALLAHASSEE, FL

1/1

COVER LETTER

TO: New Filing Section Division of Corporations	(T) 1 1 C
SUBJECT: ESTREAN	<u> </u>
(Name of Resulting Florida Li	imited Company)
The enclosed Articles of Conversion, Articles of Organiz Business Entity" into a "Florida Limited Liability Compa	tation, and fees are submitted to convert an "Other any" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter t	0:
Brent Kish	
ESTREAM TU, LLC	
9672 Sweet least St	
Orlando, FL 3282	\rightarrow
bkish @ 9wts 11 c.6m	
E-mail Address: (to be used for future annual report notification	5)
For further information concerning this matter, please ca Rect A. Kich at (40.2) (Name of Contact Person) (Area Co	<u>,446-680'</u>
Enclosed is a check for the following amount: (All check dollars and drawn on a bank located in the United States	es processed by this office must be payable in US
\$\sum_{\text{\$150.00 Filing Fees}} \ (\sum_{\text{\$155.00 Filing Fees}} \) and Certificate of Status (\$\sum_{\text{\$125 for Articles}} \) of Organization)	
Mailing Address:	Street Address:
New Filing Section	New Filing Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

P.O. Box 6327

FILED

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Articles of Conversion For

"Other Business Entity"

Into

Florida Limited Liability Company

SECRETARY OF STATE TALLAHASSEE, FL

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 Limited Liability Company
(Enter entity type. Example: corporation, limited partnership, general partnership, common law on 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)
on Soldate of organization, formation or incorporation).
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ESTREAMTU, LLC
(Enter Name of Florida Limited Liability Company) 4. If not effective on the date of filing, enter the effective date:
4. If not elective on the date of thing, that the creative are filled date for more than 90 calendar days after
(The effective date: Cannot be prior to date of receipt or filed date for 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.

Signed this day of	20_21
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative;	
Signature(s) on behalf of Other Business Entity:	Sec below for required signature(s)]
Signature: Dyles C. Ruy Printed Name: Doug 45 C. Broug	Title: Managing Menber
11 1 1/0	Title: Managing Monto or
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.	Officer. corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must contain the words "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	:
Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing Address: Mailing	- Luz
The name and the Florida street address of the registered agent are: Brent A, Kish Name Name	or -: -: -: -: -: -: -: -: -: -: -: -: -:

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:

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	Douglas C. Brough
ARBR	9672 Sweet leaf St Oclardo, FL 32827
AMBR	Darren Cumminas 2406 TERESA Cirdle Apartment A
	Tampa, FL 33629
	SECRI
(Use attachment if necessary)	SECRETARY OF STATES.
ARTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Douglas C. I	Dray/
This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felony
Douglas C.	ped 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)