# L21000339600

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

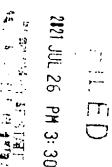
Office Use Only

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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 13, 2021

Name is misspelled please correct.

Shelton DAVID J SHELDON 6110 DESOTO AVE. NEW PORT RICHEY, FL 34653

SUBJECT: KYLA MAY MEDIA LLC Ref. Number: W21000099472

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Only non-United States entities may become a domestic limited liability company as stated in section 605.1052, Florida Statutes. You may want to explore one of the conversion options. Please return to our website sunbiz.org to download the appropriate form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Lillie S Kervin Regulatory Specialist II

Letter Number: 221A00015958

## **COVER LETTER**

TO:	New Filing So Division of C							
SUBJE	ECT: Kyla May	Media LLC						
~			ulting Florida L	imited Cor	npany)	_		
		· ·	~		nd fees are submitted to coordance with s. 605.1			her
Please	return all corre	espondence concernin	g this matter t	o:				
David \$	Shelton							
		(Contact Person)						
Kyla M	ay Media LLC					** 11	217	
	<del>-1-</del>	(Firm/Company)				4,	P. 13	
6110 D	esoto ave.						2 <b>1</b> 21 JUL 21	
0110 5	0000000	(Address)	<u> </u>	<del></del>		•	26	!
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New P	ort Richey, FL 3	4653 City, State and Zip Code)				 ul -	ယ္	
						म्ब हिंदू चर्च	3: 30	
	llerputter@gma			<u></u>				
E-m	an Address; (to b	e used for future annual re	port nouncation	5)				
For fur	ther information	on concerning this ma	tter, please ca	11:				
David S	Shelton		at ( 314	1603-	7653			
	(Name of Conta	ct Person)	_ \		ytime Telephone Number)	<u> </u>		
		or the following amou a bank located in the			sed by this office must	be payab	le in U	JS
(\$25 for & \$125	0.00 Filing Fees Conversion for Articles hization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Fi and Certified		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
	Mailing Addr New Filing So Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Divis The C	Filing Section fion of Corporations Centre of Tallahassee N. Monroe Street, Suite	e 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Artic Kyla May Media LLC	les of Cor 	iversio	on is:
(Enter Name of Other Business Entity)	_		
2. The "Other Business Entity" is a LLC or limited liability company  (Enter entity type. Example: corporation, limited partnership, general partnership, comm	on law or b	usiness	trust, etc.
First organized, formed or incorporated under the laws of Wyoming (Enter state, or if a non-U.S. entity, the	e name of th	ne coun	— try)
on July 10, 2018 (date of organization, formation or incorporation)	talan af O	·	4:
3. The name of the Florida Limited Liability Company as set forth in the attached Art	icies of U	rgani	zation:
Kyla May Media 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 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 dadocument's effective date on the Department of State's records.			
5. The plan of conversion has been approved in accordance with all applicable statutes.			
<ol> <li>The "Converted or Other Business Entity" has agreed to pay any members having appraisal which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.</li> </ol>	sal rights	the am 2121 JUL 26 PH 3:	
	45	ယ္	

Signed this 22nd day of July	20_ 2 [		
Signature of Authorized Representative of Limit			
Signature of Authorized Representative: Tangle Printed Name: David J Shelton	Title: Manager	-	
Signature(s) on behalf of Other Business Entity: [S			
Signature: Thun flow manager Printed Name: David J Shelton	Tide Manager	-	
Signature:Printed Name:	Title:	- -	
Signature:	Title	-	
Printed Name:			
Signature:Printed Name:	Title:	<del>-</del> -	
Signature:Printed Name:	Title	_	
Signature: Printed Name:	Title:	-	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.		2121 JUL	
If Florida General Partnership or Limited Liabilit	y Partnership:	UL 26	
Signature of one General Partner.		E P	<u> </u>
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	y Limited Partnership:	3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3: 3	U
All others: Signature of an authorized person.		- 0	
Fees:			
Articles of Conversion: Fees for Florida Articles of Organization:	\$25.00 \$125.00		

\$30.00 (Optional) \$5.00 (Optional) Certified Copy: Certificate of Status:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Kyla May Media LLC			
	d Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address o	f the principal office of the Limit	ed Liability Co	ompany i
Principal Office Address:	Mailing Address:		
6110 Desoto ave.	6110 Desoto ave.		
New Port Richey, FL 34653	New Port Richey, FL 3465	53	
ARTICLE III - Registered Agent, Reg		 gent's Signatu	ıre:
The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)	wn Registered Agent. You must designate ar	gent's Signatu i individual or anot	ther
The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)	wn Registered Agent. You must designate ar	gent's Signatu i individual or anot	ther
The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)  The name and the Florida street address	wn Registered Agent. You must designate ar	gent's Signatu individual or anot	ire: ther 221 JUL 26
The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)  The name and the Florida street address	wn Registered Agent. You must designate ar of the registered agent are:	gent's Signatu	ther 2121 JUL 26 PF
6110 Desoto ave.	wn Registered Agent. You must designate ar of the registered agent are:	gent's Signatu	ther 2121 JUL 26

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	
MGR	David J Shelton
	6110 Desoto ave.
	New Port Richey, FL 34653
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(Use attachment if necessary)	κ, <b>(</b>
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LE V: Other provisions, if any.	15 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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REQUIRED SIGNATURE:	
- Thele	<u> </u>
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	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the
any false information submitted in a docu	ment to the Department of State constitutes a third degree feld
as provided for in s.817.155, F.S.	<u>-</u>
David J Shelton	
	ped or printed name of signee
1 7	processor processors represent the transfer that the processor that th

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