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COVER LETTER ...

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| OVID | D-11 A- | vertising LLC | | | | | |
| SUB | JECT: Bailza AC | (Name of Res | sulting Florida | a Limi | ted Com | npany) | - |
| | | | | | | d fees are submitted to coordance with s. 605.1 | |
| Pleas | se return all corre | espondence concernin | g this matte | er to: | | | |
| Patrio | cia Klein, Esquire | | | | | | P. |
| | | (Contact Person) | | | _ | | շ։ |
| Patric | cia Klein, P.A. | | | | | | E E |
| | <u>-</u> . | (Firm/Company) | | | - | | |
| 3860 | N. Powerline Roa | sd | | | | | |
| | | (Address) | | | - | | |
| Deerl | field Beach, FL 3 | 3073 | | | | | |
| | (0 | City, State and Zip Code) | | | | | |
| Patrio | ciak@pkleinlaw.co | om . | | | | | |
| E- | mail Address: (to b | e used for future annual re | port notificati | ions) | _ | | |
| For f | urther information | on concerning this ma | tter, please | call: | | | |
| Patrio | cia Klein | | _at (⁹⁵⁴ | | 935-3 | 3171 | |
| | (Name of Conta | ct Person) | | Code |) (Day | time Telephone Number) | _ |
| | | or the following amou a bank located in the | | | orocess | sed by this office must b | e payab |
| (\$25 f & \$12 | 50.00 Filing Fees or Conversion 5 for Articles ganization) | \$155.00 Filing Fees and Certificate of Status | □\$180.00 and Certific | | | \$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 I Divisi The C 2415 | t Address: Filing Section ion of Corporations centre of Tallahassee N. Monroe Street, Suite nassee, FL 32303 | : 810 |

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 "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605. Statutes.

| 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Con Hispanic Direct Marketing & Television, Inc. |
|--|
| (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 bu |
| First organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the |
| on December 5, 1996 (date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of O |
| Baliza Advertising 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 calendathe 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 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 t |

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

| Signed this 9th day of August 2021 | |
|--|--|
| Signature of Authorized Representative of Limi | |
| Signature of Authorized Representative: Printed Name: Patricia Klein, Esquire | Title: Registered Agent |
| Signature(s) on behalf of Other Business Entity: | See below for required signature(s)] |
| Signature: Printed Name: Mark Alfieri | Title: President |
| Signature: Printed Name: | Title |
| | |
| Signature: Printed Name: | _ Title: |
| Signature:Printed Name: | Title: |
| | |
| Signature:Printed Name: | Title: |
| Signature: | TOTAL TOTAL |
| Printed Name: | I ille: |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc | |
| If Florida General Partnership or Limited Liabili Signature of one General Partner. | ty Partnership: |
| If Florida Limited Partnership or Limited Liability 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 CO

| ARTICLE I - Name: | | | |
|--|---|--|--|
| The name of the Limited Liability Compan | y 18: | | |
| Baliza Advertising LLC | | | |
| (Must contain the words "Limited L | iability Company, "L.L.C.," or "LLC.") | | |
| ARTICLE II - Address: | | | |
| | he principal office of the Limited Liability C | | |
| Principal Office Address: | Mailing Address: | | |
| 3860 N. Powerline Road | 3860 N. Powerline Road | | |
| Deerfield Beach, FL 33073 | Deerfield Beach, FL 33073 | | |
| (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of | Registered Agent. You must designate an individual or and the registered agent are: | | |
| Patricia Klein, Esquire | | | |
| | Name | | |
| 3860 N. Powerline Road | | | |
| Florida street address | (P.O. Box NOT acceptable) | | |
| Deerfield Beach | FL 33073 | | |
| City | Zip | | |
| Having been named as registered agent a | and to accept service of process for the above | | |

Having been named as registered agent and to accept service of process for the above liability company at the place designated in this certificate, I hereby accept the appoint registered agent and agree to act in this capacity. I further agree to comply with the prostatutes relating to the proper and complete performance of my duties, and I am family accept the obligations of my position as registered agent as provided for in Chapter

Registered Agent's Signature (REQUIRED)

(CONTINUED)

| Δ | $\mathbf{R}^{\prime\prime}$ | ľì | C | L.E. | IV- |
|--------------|-----------------------------|----|-------------|------|-------|
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The name and address of each person authorized to manage and control the Limited L Company:

| Title: | Name and Address: | | | |
|--|--|--|--|--|
| "AMBR" = Authorized Member | | | | |
| "MGR" = Manager | | | | |
| MGR | Mark Alfieri | | | |
| | 3860 N. Powerline Road | | | |
| | Deerfield Beach, FL 33073 | | | |
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| (Use attachment if necessary) | | | | |
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| CLE V: Other provisions, if any. | | | | |
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| REQUIRED SIGNATURE: | | | | |
| <u> </u> | | | | |
| | | | | |
| | | | | |
| Signature of a member or | an authorized representative of a membe | | | |
| This document is executed in accordance | with section 605,0203 (1) (b), Florida Statutes, I am | | | |
| any false information submitted in a docu- | ment to the Department of State constitutes a third de | | | |
| as provided for in s.817.155, F.S. | \bigcap | | | |
| \sim | ark ALtier/ | | | |
| | rped or printed name of signee | | | |
| 1 y | Filing Fees | | | |
| | | | | |

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