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COVER LETTER

TO: New Filing S Division of C				
SUBJECT. BICOAS	TAL PRODUCTIONS LI	_C		
SOBJECT.	(Name of Re	sulting Florida Li	mited Cor	mpany)
		_		nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all corr	respondence concernin	g this matter to	o:	
Jonathan A. Berkowitz	z, Esq.	-		
Cahan Nassia Walmas	(Contact Person)	- 0		
	Ray Telepman Berkowit	z Conen		
7.01.0	(Firm/Company)			
712 U.S. Highway One				
	(Address)			
North Palm Beach, FL	33408			
(City, State and Zip Code)			
KD@COHENNORRIS	COM			
E-mail Address: (to b	se used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please cal	1:	
Karin Drakas		at (⁵⁶¹	844-	3600
(Name of Conta	act Person)	_ \	de) (Day	ytime Telephone Number)
	for the following amou a bank located in the		-	sed by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□S180,00 Fili and Certified C	_	Certified Copy, and Certificate of Status
Mailing Add	ress:		Stree	t Address:

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

New Filing Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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 BICOASTAL PRODUCTIONS LLC
(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 or business trus
First organized, formed or incorporated under the laws of
on 04/22/2009 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organizat BICOASTAL PRODUCTIONS 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 a 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 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 amou

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

Signed this/ \(\alpha \)	day of August	20
	thorized Representative of Limi	
Signature of Auth	norized Representative:	Helle
Printed Name: Fra	n Heller	Title: Manager
rimed Name.	THE	
Signature(s) on b	ehalf of Other Business Entity:	[See below for required signature(s)]
Signature: LOW	al dermi	Title: Manager
Printed Name: Ror	nald Gartner	Title: Manager
Signature:		Tid
Printed Name:		Title:
Signature:	·	
Printed Name:		Title:
<u></u>		
Signature:		
Printed Name:		Title:
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Signature:		Title:
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Signature:		
Printed Name:		Title:
If Florida Corpo		2.07
Signature of Chair	rman, Vice Chairman, Director, or	Officer.
If Directors or Of	ficers have not been selected, an In	corporator must sign.
If Florida Cener	al Partnership or Limited Liabili	ity Partnershin:
Signature of one (, , , , , , , , , , , , , , , , , , ,
If Florida Limite	d Partnership or Limited Liabili	ty Limited Partnership:
Signatures of AL	<u>L</u> General Partners.	
All others:	the size of manage	
Signature of an au	unorized person.	
Fees:		
Articles o	f Conversion:	\$25.00
Fees for I	Florida Articles of Organization:	\$125.00
Certified	· ·	\$30.00 (Optional)
	e of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BICOASTAL PRODUCTIONS LLC

(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

Principal Office Address: 4521 PGA Boulevard #132 Palm Beach Gardens, FL 33418 Mailing Address: 4521 PGA Boulevard #132 Palm Beach Gardens, FL 33418

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:

Cohen Norris Wolmer Ray	Telepman Berkowitz Cohen
Na	me
712 U.S. Highway One, Sui	ite 400
Florida street address (P	O. Box NOT acceptable.
North Palm Beach	FL 33408
City	Zip

Having been named as registered agent and to accept service of process for the above stated lin liability company at the place designated in this certificate, I hereby accept the appointment a registered agent and agree to act in this capacity. I further agree to comply with the provisions statutes relating to the proper and complete performance of my duties, and I am familiar with a accept the obligations of my position as registered agent as provided for in Chapter 605. F.S.

Registered Agent's Signature (REQUIRED)

(ÇONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Danield Codoos
MGR	Ronald Gartner c/o 4521 PGA Boulevard #132
	Palm Beach Gardens, FL 33418
	Palli beach Galdens, FL 33410
MGR	Fran Heller
	c/o 4521 PGA Boulevard #132
	Palm Beach Gardens, FL 33418
<u></u>	
(Use attachment if necessary)	
(Ose attachment if necessary)	
LE V: Other provisions, if any.	
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 as provided for in s.817.155, F.S.

Fran Heller

Typed 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)

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

1, ROSSANA ROSADO, Secretary of State of the State of New York and custodian of the records required by law to be my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time certificate, the following entity information is reflected:

Entity Name: BICOASTAL PRODUCTIONS LLC

DOS ID Number: 3801686

Entity Type: DOMESTIC LIMITED LIABILITY COMPANY

Entity Status: EXISTING

Date of Initial Filing with DOS: 04/22/2009

Statement Status: CURRENT Statement Due Date: 04/30/2023

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of at the City of Albany, on August 09, 2021 at 04:05 P.M.

Brandon C Heyles

ROSSANA ROSADO, Secretary of State

By Brendan C. Hughes

Executive Deputy Secretary of State

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