

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Oity/Otate/21p/Fillione #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

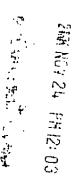
Office Use Only

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November 1, 2021

KATELYN JOHNSON *COPY* 1505 S. GEORGIA AVE TAMPA, FL 33629

SUBJECT: BENNY MEDIA LLC Ref. Number: W21000129510

We have received your document for BENNY MEDIA LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please start date of llc in WASHINGTON DC on line 2 of conversion.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee

until the following calendar year.

Please return the corrected original and one copy of 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.

Karen Lovelace Regulatory Specialist II New Filing Section

Letter Number: 821A00023407

www.sunbiz.org

COVER LETTER

(Name of Contact Person) Enclosed is a check for the following amount: (All checks processed by this office must be payable in United States) S150.00 Filing Fees (S25 for Conversion and Certificate of Status) S125 for Articles Status at (302) 542 228(c) (Area Code) (Daytime Telephone Number) (All checks processed by this office must be payable in United States) S150.00 Filing Fees and Certificate of S180.00 Filing Fees and Certificate of Status Certificate of Status	Division of C	orporations		
Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045. F.S. Please return all correspondence concerning this matter to: Kathan Contact Person Contact Person	SUBJECT:	Denny Me (Name of Res	Aia LC ulting Florida Limited Cor	mpany)
Contact Person Remain LLC Contact Person	The enclosed Article Business Entity" into	s of Conversion, Articl a "Florida Limited Li	les of Organization, ar ability Company" in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Brank Method LLC	Please return all corre	espondence concerning	g this matter to:	
SOS S. Georgia Ave (Address) Tampa FL 33629	<u>Katë</u> Benn	Jun Ehnson (Contact Person) u Medici LLC	-	
(City, State and Zip Code) Katerie La Camal Com E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Kite lan Concerning this matter, please call: (Name of Contact Person) Enclosed is a check for the following amount: (All checks processed by this office must be payable in the United States) S150.00 Filing Fees (S25 for Conversion and Certificate of Status) S180.00 Filing Fees (S25 for Articles Status) Status				
E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Kate Un				
E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Kate Un	Tampa	FL 3362°	<u> </u>	
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Enclosed is a check for the following amount: (All checks processed by this office must be payable in United States) I \$150.00 Filing Fees (\$25 for Conversion and Certificate of Status) S155.00 Filing Fees and Certificate of Status Organization)	For further information	on concerning this mat	tter, please call:	
dollars and drawn on a bank located in the United States) I \$150.00 Filing Fees (\$25 for Conversion and Certificate of Status) Status I \$185.00 Filing Fees (Certified Copy and Certificate of Status)	Kate lun (Name of Conta	Ct Person)	at (<u>302</u>) <u>5</u> (Area Code) (Da	42 228() ytime Telephone Number)
(\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and Certificate of Status Status of Organization)	Enclosed is a check f dollars and drawn on	or the following amou a bank located in the	nt: (All checks proces United States)	sed by this office must be payable in US
Mailing Address: Street Address:	(\$25 for Conversion & \$125 for Articles	and Certificate of		Certified Copy, and
New Filing Section Division of Corporations P.O. Box 6327 New Filing Section Division of Corporations The Centre of Tallahassee	Division of C	ection orporations	New Divis	Filing Section sion of Corporations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

TO: New Filing Section

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: (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Lability corperation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
on <u>US 09 2016</u> (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Benny 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 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.
A CAN NO PROPERTY OF 24
- 1975年 - 19

Signed this St day of December	20_21
Signature of Authorized Representative of Lir	
Signature of Authorized Representative Printed Name.	Title:
Signature(s) on behalf of Other Business Entity:	[See below for required six as a second
Signature:	insutiale: CEO, Owner
Signature	
Primed No.	Title
Signature.	
Printed Name.	Title:
Ngwature:	_
Printed Name	Tirle:
Signature.	•
	Title:
Signature:	
Printed Names	Titler
If Florida Corporation:	
If Florida Corporation: Disease, or Officers have not been selected, an Ir	Officer.
	•
If Fibriga General Lancieship of Chinico Causii. Signature of one General Partner.	***************************************
Signatures of ALL General Partners	ey Limica Partnership:
Alt others: Signature of an authorized person.	
<u> hoes</u>	
Articles of Conversion: Fees for Horida Articles of Day and Conversion: Certified Copy Certificate of Status.	\$25.00 \$103.00 \$30.00 (Optional) \$5.00 (Optional)

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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 pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1505 S. Grorgia Ave Tampa FL 33679	1506 S. Georgia Ave Tampa to 33629
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the r	
<u>Katelyn ob</u> Name	anson.
Florida street address (P.O	Box <u>NOT</u> acceptable)
Tampa City	FL 33/029 Zip
liability company at the place designated in registered agent and agree to act in this capac stanues relating to the proper and complete p	o accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of at performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 605, F.S.
Pagistared Agent's Sign	nature (REQUIRED)
Kedizieren Warit 2 ziar	mare (negonies)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AGR eko	Benjamin Johnson 1505 S. Georgia Ave Tampa Fr. 334029
(Use attachment if necessary)	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is executed in accordant any talse information submitted in a doc as provided for in \$ 817-155, F.S.	an authorized representative of a member ce with section 605.0203 (1) (b), Florida Statutes, I am aware to tument to the Department of State constitutes a third degree fel
¥	Denjamin Johnson yped or printed name of signee

ARTICLE IV-