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SECRETARY OF STATE

D. O'KEEFE FEB 2 4 2022

COVER LETTER **TO:** New Filing Section Division of Corporations RADIOCHICK, LLC SUBJECT: _ (Name of Resulting Florida Limited Company) The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S. Please return all correspondence concerning this matter to: Anthony Morales (Contact Person) MyUSACorporation.com (Firm/Company) 1 Radisson Plaza, Suite 800 (Address) New Rochelle, NY 10801 (City, State and Zip Code) info@myusacorporation.com E-mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: Anthony Morales (Name of Contact Person) Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States) □\$185.00 Filing Fees, S180.00 Filing Fees ☐\$155.00 Filing Fees □ \$150.00 Filing Fees Certified Copy, and and Certified Copy (\$25 for Conversion and Certificate of Certificate of Status & \$125 for Articles Status of Organization) **Street Address:**

Mailing 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 <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 Articles of Conversion is: RADIOCHICK, 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 trust, e |
| (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, e |
| First organized, formed or incorporated under the laws of |
| 7/8/1999 |
| on (date of organization, formation or incorporation) |
| 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization RADIOCHICK, 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. |
| 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. |
| 2022 SE SE |

| Signed this <u>02</u> day of <u>02</u> | 20 | | | |
|---|--|---------------|------------|--|
| Signature of Authorized Representative of Li | mited Liability Company: | | | |
| Signature of Authorized Representative: Printed Name: LESLIE GOLDBLOOM | Title Member | _ | | |
| Signature(s) on behalf of Other Business Entity | : [See below for required signature(s)] | | | |
| Signature: Printed Name: LESLIE GOLDBLOOM | | _ | | |
| Printed Name: CESCIE GOLDBLOOM | Title: Member | _ | | |
| Signature:Printed Name: | Title: | _ | | |
| | | | | |
| Signature:Printed Name: | Title: | _ _ | | |
| Signature: | | | | |
| Signature:Printed Name: | Title: | _ | | |
| Signature:Printed Name: | Title: | _ | | |
| Signature: | | | | |
| Printed Name: | Title: | _ | | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Director, If Directors or Officers have not been selected, an | | | | |
| If Florida General Partnership or Limited Liab Signature of one General Partner. | oility Partnership: | | | |
| If Florida Limited Partnership or Limited Liab Signatures of <u>ALL</u> General Partners. | ility Limited Partnership: | | | |
| All others: Signature of an authorized person. | | SECF FALLA | 2022 FEB | |
| Fees: | | O 2. | | |
| Articles of Conversion: Fees for Florida Articles of Organization Certified Copy: Certificate of Status: | \$25.00 : \$125.00 \$30.00 (Optional) \$5.00 (Optional) | OFSTA | 9 PM 6: 52 | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| RADI | OCHICK, LLC | |
|---|---|--------------------------|
| | ability Company, "L.L.C.," or "L.L.C.") | <u></u> |
| ARTICLE II - Address: The mailing address and street address of the | e principal office of the Limit | ed Liability Company is: |
| Principal Office Address: | Mailing Address: | |
| 6919 N CALUMET CIRCLE LAKE WORTH, FL 33467 | 6919 N CALUMET CIRCL LAKE WORTH, FL 33467 | |
| | the registered agent are: DLDBLOOM Jame LUMET CIRCLE | |
| 001011011 | | |
| | (P.O. Box NOT acceptable) | |
| | | |
| Florida street address | (P.O. Box NOT acceptable) FL 33467 Zip | |

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

| <u>Title:</u> "AMBR" = Authorized Member | Name and Address: |
|--|--|
| "MGR" = Manager AMBR | LESLIE GOLDBLOOM 6919 N CALUMET CIRCLE LAKE WORTH, FL, 33467, US |
| | |
| | A SECRITE |
| (Use attachment if necessary) | HASSE |
| ARTICLE V: Other provisions, if any. | PH 6: 52 E. FLORIDA |
| 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.

LESLIE GOLDBLOOM

Typed or printed name of signee

Filing Fees