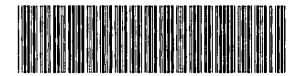
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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Dx	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only S. CHATHAM

APR - 8 2022



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SECRETARY OF STATE

# COVER LETTER

Division of Corp					
SUBJECT: Tonally Reco	ords, LLC				
		ulting Florida Lin	nited Con	npany)	
				d fees are submitted to conve ecordance with s. 605.1045, F	
Please return all correspondent	ondence concerning	g this matter to	:		
Christian Tobon					
(	Contact Person)		_		
(	Firm/Company)		_		
19303 Lymestone Ct			_		
	(Address)				
New Smyrna Beach, Florid	da 32168				
(City	, State and Zip Code)				
surfinbird08@gmail.com			_		
E-mail Address: (to be us	sed for future annual rep	port notifications)			
For further information	concerning this mat	ter, please call			
Christian Tobon		_at ( <sup>973</sup>	88639	965	
(Name of Contact P	Person)	(Area Cod	e) (Day	time Telephone Number)	
Enclosed is a check for the dollars and drawn on a b	_	•	process	sed by this office must be pay	able in US
(\$25 for Conversion an	\$155.00 Filing Fees and Certificate of tatus	□\$180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Address New Filing Secti Division of Corp P.O. Box 6327 Tallahassee, FL	ion porations		New I Divisi The C 2415	Filing Section fon of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 massee, FL 32303	T <sub>A</sub> ,

INHS11 (7/17)

### **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: Tonally Records, 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, etc.
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
August 21, 2019
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:
Tonally Records, 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.



Signed this 13	day of March	2022
Signature of Auth	orized Representative o	f Limited Liability Company:
Signature of Autho	rized Representative:	hristian Tobon
Printed Name: Christ	tian Tobon	Title: Chief Executive Officer
	<del></del>	ntity:  See below for required signature(s)
Signature: Chr.	istian Tobon	
Printed Name: Chris	tian Tobon	Title: Organizer and Member
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
<u> If Florida Corpora</u>		
	nan, Vice Chairman, Direc	
If Directors or Office	cers have not been selected	l, an Incorporator must sign.
<u>If Florida General</u>	Partnership or Limited	Liability Partnership:
Signature of one Ge	eneral Partner.	
		Liability Limited Partnership:
Signatures of ALL	General Partners.	
All others: Signature of an auth	norized person.	
Fees:		

\$25.00

\$125.00

\$30.00 (Optional) \$5.00 (Optional)

Articles of Conversion:

Certified Copy: Certificate of Status:

Fees for Florida Articles of Organization:

FILED 22 MAR 18 PM 2:20 PALLAHASSET TIMERA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR	A LONDA LIMITED LIADILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company	vis:
Tonally Records, LLC	
(Must contain the words "Limited Lia	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
19303 Lymestone Ct	19303 Lymestone Ct
New Smyrna Beach, Florida 32168	New Smyrna Beach, Florida 32168
	- <del></del>
	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
The name and the Florida street address of the	he registered agent are:
Christian Tobon	
N	ame
19303 Lymestone Ct	
Florida street address (l	P.O. Box NOT acceptable)
New Smyrna Beach	FL <sup>32168</sup>
City	Zip
liability company at the place designate registered agent and agree to act in this can statutes relating to the proper and complet accept the obligations of my position as Christian Tobor	
	Signature (REQUIRED)  TINUED)  Signature (REQUIRED)
	92.50

# ARTICLE IV-

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

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Christian Tahan
AMBR	Christian Tobon 19303 Lymestone Ct
	New Smyrna Beach, Florida 32168
	<del> </del>
(Use attachment if necessary)	
,	
(Use attachment if necessary)  LE V: Other provisions, if any.	
·	
REQUIRED SIGNATURE:  Christian Tobon  Signature of a member or This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree fe
REQUIRED SIGNATURE:  Christian Tobon  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Christian Tobon	with section 605.0203 (1) (b), Florida Statutes. I am aware ment to the Department of State constitutes a third degree fe
REQUIRED SIGNATURE:  Christian Tobon  Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.  Christian Tobon	with section 605.0203 (1) (b), Florida Statutes. I am aware

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

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SECRETARY OF STATE
TALLAMASSEE From In