(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W22000 40 98 4 W22000 8 10 4
W22000 10 4
Office Use Only

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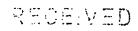


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# FLORIDA DEPARTMENT OF STATE Division of Corporations

March 30, 2022

JACK LEVINE 180 NE 29TH ST APT #1011 MIAMI, FL 33173

SUBJECT: LEVINE ENTERTAINMENT MANAGEMENT LLC

Ref. Number: W22000040984

We have received your document for LEVINE ENTERTAINMENT MANAGEMENT LLC and your check(s) totaling \$278.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return 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 Letter Number: 722A00007437

### **COVER LETTER**

Division of Corporations			
SUBJECT: LeVine Entertainment Manage	ement LLC		
(Name of R	tesulting Florida Limited	l Company)	
The enclosed Articles of Conversion, Art Business Entity" into a "Florida Limited			Other
Please return all correspondence concerni	ing this matter to:		
Jack LeVine			
(Contact Person)			
LeVine Entertainment Management LLC			
(Firm/Company)			
180 NE 29th St Apt #1011			
(Address)			
Miami, FL 33173			
(City, State and Zip Code)	)		
jack@levineent.com			
E-mail Address: (to be used for future annual)	report notifications)		
For further information concerning this m	atter, please call:		
Jack LeVine	at ( <u>914</u> )	960-0487	
(Name of Contact Person)		(Daytime Telephone Number)	
Enclosed is a check for the following amo dollars and drawn on a bank located in the		cessed by this office must be payable in	US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$180,00 Filing Fo and Certified Copy	Certified Copy, and	٠
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	N ID T 2-	treet Address:  ew Filing Section  ivision of Corporations  he Centre of Tallahassee  415 N. Monroe Street, Suite 810  allahassee, 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 8.605.1045. Florida Statutes

Statutes.				
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: LeVine Entertainment Management LLC				
(Enter Name of Other Business Entity)	,			
2. The "Other Business Entity" is a Single Member-Managed Limited Liability Company				
(Enter entity type. Example: corporation, limited partnership, general partnership, commo	on law or business trust, etc.)			
First organized, formed or incorporated under the laws of	ized, formed or incorporated under the laws of			
(Enter state, or if a non-U.S. entity, the	name of the country)			
3/12/2020 on				
(date of organization, formation or incorporation)				
3. The name of the Florida Limited Liability Company as set forth in the attached Arti	icles of Organization:			
LeVine Entertainment Management LLC				
(Enter Name of Florida Limited Liability Company)	<b>-</b> *			
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 9 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 dat document's effective date on the Department of State's records.	90 calendar days after			
5. The plan of conversion has been approved in accordance with all applicable statutes.				
<ol> <li>The "Converted or Other Business Entity" has agreed to pay any members having apprais which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.</li> </ol>	sal rights the amount to			
	- ,			
	erene Nacio			

Signed this	s 3 day of March	20 22
<u>Signature</u>	of Authorized Representative of	of Limited Liability Company:
		Decusioned by
Signature of	of Authorized Representative:	Cochul.
Printed Na	me: Jack LeVine	Title: Owner
		ntity: [See below for required signature(s)]
Signature:	All Selling	Title:
Printed Nat	ne: JALK LEVINE	Title:
Signature:	_	
Printed Nar	ne:	Title:
	<u></u>	
Signature:		Title:
Printed Nar	ne:	Title:
Signature:		Title:
Printed Nar	ne:	Title:
a:		
Signature:		Title:
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Cimatura		
orgnature. Printed Nov		Title:
i iiiicci įvai.		
lf Florida <b>(</b>	Corporation:	
	Chairman, Vice Chairman, Direc	tor, or Officer.
	or Officers have not been selected	
	General Partnership or Limited	Liability Partnership:
Signature of	fone General Partner.	
	<u> Limited Partnership or Limited I</u>	Liability Limited Partnership:
Signatures (	of ALL General Partners.	
t II askanas		
<u>XII Others:</u> Signatura of	f an authorized person.	
signature or	an authorized person.	
<sup>r</sup> ees:		
Arti	cles of Conversion:	\$25.00
	s for Florida Articles of Organiza	•
	ified Copy:	\$30.00 (Optional)
	ificate of Status:	\$5,00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF OROM 1021110. CONTE	
ARTICLE I - Name: The name of the Limited Liability Company is:	
The name of the Elimica Diability Company is.	
LeVine Entertainment Management LLC	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7901 4th St N STE 300	7901 4th St N STE 300
St. Petersburg, FL 33702. USA	St. Petersburg, FL 33702, USA
	-1
The name and the Florida street address of the re-  Tom Glover - Northwest Regist  Name	tered Agent
7901 4th St N STE 300	
Florida street address (P.O.	Box NOT acceptable)
St. Petersburg	FL <sup>33702</sup>
City	Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete paccept the obligations of my position as reg	
Registered Agent's Sign	anne (KEQUIKED)

(CONTINUED)

### 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	Jack LeVine
AMBR	7901 4th St N STE 300
	St. Petersburg, FL 33702, USA
(Use attachment if necessary)	
(Use attachment if necessary)	
(Use attachment if necessary)	
•	
•	
(Use attachment if necessary)  LE V: Other provisions, if any.	
•	
•	
LE V: Other provisions, if any.	— DocuSigned by:
LE V: Other provisions, if any.	— DocuSigned by:
•	— DocuSigned by:  —
LE V: Other provisions, if any.	— DocuSigned by:  ———————————————————————————————————
LE V: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or	an authorized representative of a member
LE V: Other provisions, if any.  REQUIRED SIGNATURE:  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 award
LE V: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member or This document is executed in accordance	Helline 1830418213064CO

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)