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COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: ITCHY BEE PRODUCTIONS, LL	.C	
	sulting Florida Limit	ed Company)
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited Li		on, and fees are submitted to convert an "Other" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning	g this matter to:	
Betsy Kalin		
(Contact Person)		
ITCHY BEE PRODUCTIONS, LLC		
(Firm/Company)		
901 Sykes Court		
(Address)		
Orlando, FL 32828		
(City, State and Zip Code)		
itchybee@gmail.com		
E-mail Address: (to be used for future annual re-	port notifications)	
For further information concerning this mat	tter, please call:	
Betsy Kalin	_at (877-3438
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amou dollars and drawn on a bank located in the U	•	rocessed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$180.00 Filing and Certified Cop	-
Mailing Address: New Filing Section		Street Address: New Filing Section
Division of Corporations		Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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



LLC-1 (REV 03/2005)

State of California Secretary of State

200711310187

ENDORSED - FILED

in the office of the Secretary of State of the State of California

MAR 2 8 2007

APPROVED BY SECRETARY OF STATE

LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION

A \$70.00 filing fee must accompany this form. IMPORTANT – Read instructions before completing this form. This Space For Filing Use Only ENTITY NAME (End the name with the words "Limited Liability Company," "Ltd. Liability Co.," or the abbreviations "LLC" or "L.L.C.") NAME OF LIMITED LIABILITY COMPANY Itchy Bee Productions LLC PURPOSE (The following statement is required by statute and may not be altered.) THE PURPOSE OF THE LIMITED LIABILITY COMPANY IS TO ENGAGE IN ANY LAWFUL ACT OR ACTIVITY FOR WHICH A LIMITED LIABILITY COMPANY MAY BE ORGANIZED UNDER THE BEVERLY-KILLEA LIMITED LIABILITY COMPANY ACT. INITIAL AGENT FOR SERVICE OF-PROCESS (If the agent is an individual, the agent must reside in California and both Items 3 and 4 must be completed. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to Corporations Code section 1505 and Item 3 must be completed (leave Item 4 blank). 3. NAME OF INITIAL AGENT FOR SERVICE OF PROCESS Betsy Kalin 4. IF AN INDIVIDUAL, ADDRESS OF INITIAL AGENT FOR SERVICE OF PROCESS IN CALIFORNIA STATE ZIP CODE 935 N. Alfred St. #5 90069 Los Angeles MANAGEMENT (Check only one) 5. THE LIMITED LIABILITY COMPANY WILL BE MANAGED BY. ✓ ONE MANAGER MORE THAN ONE MANAGER ALL LIMITED LIABILITY COMPANY MEMBER(S) ADDITIONAL INFORMATION ADDITIONAL INFORMATION SET FORTH ON THE ATTACHED PAGES, IF ANY, IS INCORPORATED HEREIN BY THIS REFERENCE AN MALADE A-PART OF THIS CERTIFICATE. **EXECUTION** 7. I DECLARE I AM THE PERSON WHO EXECUTED THIS INSTRUMENT, WHICH EXECUTION IS MY ACT AND DEED. March 26, 2007 DATE SIGNATURE OF ORGANIZER Betsy Kalin TYPE OR PRINT NAME OF ORGANIZER RETURN TO (Enter the name and the address of the person or firm to whom a copy of the filed document should be returned.) 8. NAME Betsy Kalin FIRM Itchy Bee Productions **ADDRESS** 935 N. Alfred St. #5 CITY/STATE/ZIP | Los Angeles, CA 90069



June 4, 2022

BETSY KALIN 901 SYKES CT ORLANDO, FL 32828

Qualification documents for ITCHY BEE PRODUCTIONS, LLC were filed on May 13, 2022, and assigned document number M22000008659. Please refer to this number whenever corresponding with this office.

Your limited liability company is authorized to transact business in Florida as of the file date.

To maintain "active" status with the Division of Corporations, an annual report must be filed yearly between January 1st and May 1st beginning in the year following the file date or effective date indicated above. If the annual report is not filed by May 1st, a \$400 late fee will be added.

A Federal Employer Identification Number (FEI/EIN) will be required when this report is filed. Apply today with the IRS online at:

https://sa.www4.irs.gov/modiein/individual/index.jsp.

Please notify this office if the limited liability company address changes.

Should you have any questions regarding this matter, please contact this office at the address given below.

Consina Griffin-Greaux Regulatory Specialist II Registration Section Division of Corporations

Letter Number: 122A00012528

Articles of Conversion

For

"Other Business Entity"

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: ITCHY BEE PRODUCTIONS, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
03/28/2007 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: ITCHY BEE PRODUCTIONS, LLC
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ITCHY BEE 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 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 locument'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 June	20 <u></u> 20	
	thorized Representative of Lim		
Signature of Auth Printed Name: Be	norized Representative: <u>Btn</u> tsv Kalin	Title: Member	_
Signature(s) on b	ehalf of Other Business Entity:	[See below for required signature(s)]	
Signature:	Bin la	Title: Member	_
Printed Name: Bets	sy Kalin	Title: Member	
Signature: Printed Name:		Title:	-
Signature: Printed Name:		Title:	_ _
Signature: Printed Name:		Title:	
Signature: Printed Name:		Title:	WALLEY JUL-5
Signature: Printed Name:		Title:	- 555 - 555
	ration: man, Vice Chairman, Director, or icers have not been selected, an In		SSEET DE LA
	al Partnership or Limited Liabili	ity Partnership:	
Signature of one C			
	<u>d Partnership or Limited Liabili</u> _ General Partners.	ty Limited Partnership:	
All others: Signature of an au	thorized person.		
Fees:			
Fees for F Certified (f Conversion: lorida Articles of Organization: Copy: c of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

ARTICLE II The mailing ac	- Address: ldress and street address of th	e principal office of the Limited Liability	· Company is:
Principal Offi		Mailing Address:	
901 Sykes Cou	rt	901 Sykes Court	
Orlando, FL 328		Orlando, FL 32828	
		1 (NET C. Desistand Agents Cian	atur.
(The Limited Liabi business entity wi	lity Company cannot serve as its own bits an active Florida registration.) the Florida street address of t	ered Office, & Registered Agent's Signage an individual or a segistered Agent. You must designate an individual or the registered agent are:	anoiner 2022 JUL
(The Limited Liabi business entity wi	lity Company cannot serve as its own F th an active Florida registration.) the Florida street address of t Betsy Kalin	egistered Agent. You must designate an individual or in the registered agent are:	anoiner 2022 JUL -5
(The Limited Liabi business entity wi	lity Company cannot serve as its own F th an active Florida registration.) the Florida street address of t Betsy Kalin	he registered agent are:	anoiner 2022 JUL -5
(The Limited Liabi business entity wi	lity Company cannot serve as its own F th an active Florida registration.) the Florida street address of t Betsy Kalin 901 Sykes Court	he registered agent are:	anoiner 2022 JUL
(The Limited Liabi business entity wi	lity Company cannot serve as its own F th an active Florida registration.) the Florida street address of t Betsy Kalin 901 Sykes Court	he registered agent are:	anoiner 2022 JUL -5

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Brill ...

statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager AMBR	Betsy Kalin	
	901 Sykes Court	
	Orlando, FL 32828	
		<u>.</u>
		
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(Use attachment if necessary)		
		AM 9: 43 ELECTRORIO
ARTICLE V: Other provisions, if any.		
		
REQUIRED SIGNATURE:	/4	
Rit.		
Company of the compan	and havinad warmarantative of a	. man han
This document is executed in accordance or a	in authorized representative of a with section 605,0203 (1) (b). Florida Sta	tutes. I am aware that
any false information submitted in a docum	nent to the Department of State constitutes	s a third degree felony
as provided for in s.817.155, F.S.		
Betsy Kalin		
	ed or printed name of signee	
* 2 tr	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)

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.

. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: TCHY BEE PRODUCTIONS, LLC
(Enter Name of Other Business Entity)
The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
California Tirst organized, formed or incorporated under the laws of
03/28/2007
n (date of organization, formation or incorporation)
The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: TCHY BEE PRODUCTIONS, LLC
(Enter Name of Florida Limited Liability Company)
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.) ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the becument's effective date on the Department of State's records.
. 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.

Signed this 1	3 day of June	_ <u> </u>	
Signature of	Authorized Representative of Lim	ited Liability Company:	
(2)	Authorized Representative: $2m$	7/1	
Signature of a	Betsy Kalin	Title: Member	
Printed Name	: Detsy Kaiii	Title: Member	_
_		See below for required signature(s)	
Signature:	Ring de	Title: Member	_
Printed Name	Betsy Kalin	Title: Member	_
Signature:			_
Printed Name		Title:	_
Signature:		Title:	_
Printed Name:		Little:	
Signature:			
Printed Name:			
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Signature:		Title:	爱。 第
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Signature:		Title:	- Fr
Printed Name:		Title:	- 20
If Florida Co	rnoration:		MALLOW SSEE TONIO
	Chairman, Vice Chairman, Director, or	Officer.	9.
	Officers have not been selected, an In	corporator must sign.	₹r.
unn a c	the action of instant Linkin		
	<u>neral Partnership or Limited Liabili</u> ne General Partner.	ty rartiersing.	
•			
<u>If Florida Lin</u>	<u>nited Partnership or Limited Liabili</u>	ty Limited Partnership:	
Signatures of _i	ALL General Partners.		
All others:			
	n authorized person.		
<u>Pees:</u>			
Article	es of Conversion:	\$25.00	
	or Florida Articles of Organization:	\$125.00	
	ied Copy:	\$30,00 (Optional)	
	icate of Status:	\$5.00 (Optional)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ITCHY BEE PRODUCTIONS, LLC (Must contain the word	s "Limited Liability Company, "L. F. C.," or "FLC." t	•
ARTICLE H - Address: The mailing address and street ad	dress of the principal office of the Limited Liability C	Company is:
Principal Office Address:	Mailing Address:	
901 Sykes Court	901 Sykes Court	
Orlando, FL 32828	Orlando, FL 32828	-
	アノご	· · · · · · · · · · · · · · · · · · ·
Betsy Kalin 901 Sykes Cou	Name Property	-5 M 9:
901 Sykes Cou	بتر	
901 Sykes Cou	nt	S : 5
901 Sykes Cou Florida street	address (P.O. Box NOT acceptable)	S : 1

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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		
AMBR	Betsy Kalin	
	901 Sykes Court	
	Orlando, FL 32828	
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(Use attachment if necessary)		i i
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DESCRIPTION OF THE STATE OF THE	AM 9: 43	
RTICLE V: Other provisions, if any.	3	
		_
REQUIRED SIGNATURE:		
 	/1	
150	To Comment of the Com	
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 th	at
any false information submitted in a docur	ment to the Department of State constitutes a third degree felo	nv

Betsy Kalin Typed or printed name of signee

as provided for in s.817.155, F.S.

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent