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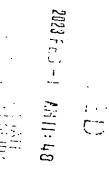
(Requestor's Name)
(Address)
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(A.1.)
(Address)
(City/State/Zip/Phone #)
<u>_</u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Warne)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:

Office Use Only



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## **COVER LETTER**

TO: New Filing So Division of C							
SUBJECT: BCM Me	edia, LLC						
3000000	(Name of Res	ulting Florida Limi	ted Con	ipany)			
				d fees are submitted to coccordance with s. 605.10		a "Other	r
Please return all corre	espondence concerning	g this matter to:					
Brenda McKenna							
	(Contact Person)		_				
BCM Media, LLC							
	(Firm/Company)		_				
110 Front Street, Suite	300						
	(Address)		-				
Jupiter, FL 33477							
	City, State and Zip Code)		-				
bmckenna@bcmmedia	ı.biz						
E-mail Address: (to b	e used for future annual re	port notifications)	-				
For further information	on concerning this ma	tter, please call:					
Brenda McKenna		at ( <sup>203</sup>	3261	477			
(Name of Conta	ct Person)	(Area Code	) (Day	time Telephone Number)			
	or the following amou a bank located in the		process	sed by this office must be	payable	in US	
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified Co		S185,00 Filing Fees, Certified Copy, and Certificate of Status			
Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee, H	ection orporations 7		New I Divisi The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 8 nassee, FL 32303	(Alf), 12 (Alf), 14 (Alf), 15 (Alf),	2020 1: 1 Aii II: 48	 C.

## **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: BCM Media
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
12/3/2012 on
On
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
BCM 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.



Signed this 27 day of January	_20 <i>d3</i>
Signature of Authorized Representative of Lani	ited Liahility Lompany:
Signature of Authorized Representative: Printed Name: Brenda McKenna	Title: Founder, Managing Director
Printed Name, Dienda Mortenna /	Title. Footices, Managing Briceloi
Signature(s) on behalf of Other Business Entity:	
Signature: Denda Miseur	
Printed Name: Brenda McKenna	Title: Founder, Managing Director
Signature:	
Printed Name:	Title:
Signature:Printed Name:	Tido
Finited Name.	1 III.
Signature:	
Printed Name:	Title:
Cimenton	
Signature:Printed Name:	Title:
Timed Futtle	
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In-	corporator must sign.
10 D	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
organical of the Ceneral Farmer.	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FO		Y COMPANY			
The name of the Limited Liability Compa	iny is:				
BCM Media, LLC					
(Must contain the words "Limited	Liability Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liab	oility Company is:			
Principal Office Address:	Mailing Address:				
110 Front Street, Suite 300 Jupiter, FL 33477	Jupiter, FL 33477				
ARTICLE III - Registered Agent, Registered Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	stered Office, & Registered Agent's S n Registered Agent. You must designate an individu	Signature:			
The name and the Florida street address o	of the registered agent are:				
Brenda McKenna	<u> </u>				
	Name				
110 Front Street, Suite 3	300				
Florida street address	s (P.O. Box <u>NOT</u> acceptable)				
Jupiter	FL <sup>33477</sup>				
City	Zip				
registered agent and agree to act in this statutes relating to the proper and com accept the obligations of my position	ated in this certificate. I hereby accept th	ne appointment as a the provisions of all an familiar with and			
	NTINUED)	2029 5 ( ) - [			
		AH 11: 49			

# ARTICLE IV-

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

"AMBR" = Authorized Member "MGR" = Manager AMBR	
AMBR	Dec. to M. Kara
	Brenda McKenna
	110 Front Street, Suite 300
	Jupiter, FL 33477
MGR	Shaun McKenna
	110 Front Street, Suite 300
	Jupiter, FL 33477
	<del></del>
(Use attachment if necessary)	
•	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Benda / Be	wo
Brenda Mile	wo
Signature of a member or	an authorized representative of a member
Signature of a member or a This document is executed in accordance any false information submitted in a document is executed in a document	with section 605.0203 (1) (b), Florida Statutes. I am aware th
Signature of a member or a This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.	with section 605.0203 (1) (b), Florida Statutes. I am aware th
Signature of a member or a This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.  Brenda McKenna	with section 605.0203 (1) (b), Florida Statutes. I am aware the nent to the Department of State constitutes a third degree feld
Signature of a member or a This document is executed in accordance any false information submitted in a docur as provided for in s.817.155, F.S.  Brenda McKenna	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the ment to the Department of State constitutes a third degree feloped or printed name of signee  Filing Fees

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