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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Boltz Media LLC	
(Name of I	Resulting Florida Limited Company)
The enclosed Articles of Conversion, Ar Business Entity" into a "Florida Limited	ticles of Organization, and fees are submitted to convert an "Other Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concern	ing this matter to:
Rachel Boltz	
(Contact Person)	
Boltz Media LLC	
(Firm/Company)	
468 S Leavitt Ave	
(Address)	
Orange City, FL 32763	
(City, State and Zip Code	:)
rachel@boltzmedia.com	
E-mail Address: (to be used for future annual	report notifications)
For further information concerning this r	natter, please call:
Rachel Boltz	at (<u></u>
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following am dollars and drawn on a bank located in the	ount: (All checks processed by this office must be payable in US ne United States)
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) □ \$155.00 Filing Fees and Certificate of Status	S S 180.00 Filing Fees and Certified Copy Certificate of Status
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: 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: Boltz Media, Inc
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation
2. The "Other Business Entity" is a
First organized, formed or incorporated under the laws of [Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
07/11/2022
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Boltz 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 20th day of February	_ 20 <u></u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	_ Title: AMBR
Signature(s) on behalf of Other Business Entity:	
Signature: Vica Circle Printed Name: Rachel Boltz	
Printed Name: Rachel Boltz	Title: President
Signature:Printed Name:	Title:
Signature:Printed Name:	m: I
Printed Name:	Title:
Signature:	
Signature:Printed Name:	
Signature: Printed Name:	Title:
Fillited Natic.	
Signature:Printed Name:	
Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc. If Florida General Partnership or Limited Liabilit	corporator must sign.
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy; Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)
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23 EE 25 EE	
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FO ARTICLE I - Name: The name of the Limited Liability Compa			
Boltz 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 Li	mited Liability	Company is:
Principal Office Address:	Mailing Address:		
468 S Leavitt Ave	468 S Leavitt Ave		_
Orange City, FL 32763	Orange City, FL 32763	<u> </u>	-
(The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of Rachel Boltz		_	
468 S Leavitt Ave			
	s (P.O. Box <u>NOT</u> acceptable)	
Orange City	FL 32763		
City	Zip		
Having been named as registered agent liability company at the place designe registered agent and agree to act in this statutes relating to the proper and comaccept the obligations of my position	ated in this certificate, I hereb capacity. I further agree to c plete performance of my duti	y accept the appomply with the p es, and I am fam	oontment as provisions of a iliar with and
Registred Agent	s Signature (REQUIRED)		
regimered rigen.		5	2
(CO	NTINUED)		2023 FED 23 - XN
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The name and address of each person authorized to manage and control the Limited Liability Company:

"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Rachel Boltz
, we have	468 S Leavitt Ave
	Orange City, FL 32763
(Use attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any,	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
LE V: Other provisions, if any.	
REQUIRED SIGNATURE:	an authorized representative of a member
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member e with section 605,0203 (1) (b). Florida Statutes, I am aware ament to the Department of State constitutes a third degree for
REQUIRED SIGNATURE: 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. Rachel Boltz	e with section 605.0203 (1) (b). Florida Statutes. Fain aware iment to the Department of State constitutes a third degree for
REQUIRED SIGNATURE: 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. Rachel Boltz	cudak essailas 605 0203 (1) (b). Morado Statutos, Lam aware

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