(Red	questor's Name)	
(Adı	dress)	
(Add	dress)	
	y/State/Zip/Phone #)	
(CR)	y/State/Zip/Phone #)	
PICK-UP	MAIT	MAIL
_		
(Bus	siness Entity Name)	
(Do	cument Number)	
ਟ Copies	Certificates o	f Status
- 	 .	
. I instructions to Filin	g Officer:	

Office Use Only



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April 7, 2023

CT CORP

CORRECTED
Please Allow For
Same File Date

SUBJECT: COURTNEY ADELEYE PRODUCTIONS, LLC

Ref. Number: W23000040872

We have received your document for COURTNEY ADELEYE PRODUCTIONS, LLC. However, the document has not been filed and is being returned for the following:

The wrong documents were returned. Please return Courtney Adeleye Productions LLC with the corrections.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham Regulatory Specialist III Director's Office

Letter Number: 723A00007929

ALI AHASSI I

2023 APR | AM III.

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

D	ate:	03/24/2023	
		Acc#I201600000	172 4: C)W
Name:	Courtney	Adeleye Productions	LLC .
Document #:			
Order #:	14853380) - 55	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good			
Standing:			
Certified Copy of			
Apostille/Notarial Certification:		Country of Destination	n:
Filing:	Certifie	d: 🗸	Email Address for Annual Report Notifications
	Plain: COGS:		aaron@pmgcfo.com
Availability Document Examiner Updater Verifier	Amoun	t:\$ 180.00	
W.P. Verifier Ref#		Thank you!	

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Courtney Adeleye Productions.	LLC		
(Name of Re	esulting Florida Limit	ed Compar	ny)
The enclosed Articles of Conversion, Arti Business Entity" into a "Florida Limited I			
Please return all correspondence concerni	ng this matter to:		
Canela Services LLC			
(Contact Person)			
(Firm/Company)	<u> </u>		
1800 E Las Olas Blvd FL2			
(Address)			
Fort Lauderdale, FL 33301			
(City, State and Zip Code)			
aaron@pmgcfo.com			
E-mail Address: (to be used for future annual t	report notifications)		
For further information concerning this m	atter, please call:		
Heather Purser	at (<u>205</u>	ູ 918-505	0
(Name of Contact Person)		/(Daytim	e Telephone Number)
Enclosed is a check for the following amodollars and drawn on a bank located in the		rocessed	by this office must be payable in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\square{1}\$\$ \$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Cop	y C	1\$185.00 Filing Fees, ertified Copy, and ertificate of Status
Mailing Address:		Street A	ddress:
New Filing Section			ng Section
Division of Corporations P.O. Box 6327			of Corporations are of Tallahassee
F.O. DOX 0347		THE COU	ne of Tahanassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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Articles of Conversion For "Other Business Entity" Into

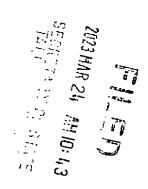
Florida Limited Liability Company

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.

	The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: urtney Adeleye 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.)
Firs	St organized, formed or incorporated under the laws of
	(Enter state, or if a non-U.S. entity, the name of the country) 07/01/2019
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:
Co	urtney Adeleye Productions, LLC
	(Enter Name of Florida Limited Liability Company)
	If not effective on the date of filing, enter the effective date:
•	te effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
	date this document is filed by the Florida Department of State.)
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the iment's effective date on the Department of State's records.
5. 1	he plan of conversion has been approved in accordance with all applicable statutes.
6. 1	'he "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 15th day of March 20 23 .	
Signature of Authorized Representative of Limited Liability Com	ipany:
Signature of Authorized Representative: Courtney Ideleye Printed Name: Courtney Adeleye 19038AFF25DF445 c; Manager	
Signature(s) on behalf of Other Rusiness Entity. ISee below for requestions and the Addition.	
Signature: Courtney Adeleye Printed Name: Title:	
Signature: Title:	
Signature: Title:	
Signature: Title:	
Signature: Title:	
Signature: Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign	n.
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.	
If Florida Limited Partnership or Limited Liability Limited Partner Signatures of <u>ALL</u> General Partners.	ship:
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)	



ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Courtney Adeleye Productions, LLC		
(Must contain the words "Limited Liab	bility Company, "L.L.C.," or "L.L.C.")	
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Comp	pany is:
Principal Office Address:	Mailing Address:	
6526 Old Brick Road, Suite 120-327	6526 Old Brick Road, Suite 120-327	
Windermere, Florida 34786	Windermere, Florida 34786	
		
1800 E Las Olas Blvd FL2	ame A A	
Fort Lauderdale	FI 33301	
City	Zip	
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet	nd to accept service of process for the above state of in this certificate. I hereby accept the appointm pacity. I further agree to comply with the provis the performance of my duties, and I am familiar v registered agent as provided for in Chapter 605	nent as cions of at with and

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Λ	\mathbf{R}^{\prime}	11	CI	I.F.	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	On the second delegation
MGR	Courtney Adeleye
	6526 Old Brick Road, Suite 120-327
	Windermere, FL 34786

	<u> </u>
	-1.
(Use attachment if necessary)	
•	
	(.
ICLE V: Other provisions, if any.	ير الله الله الله الله الله الله الله الل
	्रा दे
<u>REQUIRED SIGN</u> ATURE:	
Courtney adelege	
Signature of a member or a	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am aware that
any false information submitted in a docur	nent to the Department of State constitutes a third degree felon
as provided for in s.817.155, F.S.	
Courtney Adeleye	
Courtney Adeleye	ped or printed name of signee
1)]	Filing Fees
\$125 00 Viling Rea for Anti-land	f Organization and Designation of Registered Ag

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