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(C)	ity/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
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(D)	ocument Number)	
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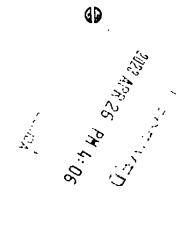
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2023 APR 26 PH 3: 34 SECONDATE OF STATE





## Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

04/26/2023

ENTITY NAME <u>r ui</u>	pleLines Studio LLC.
DOCUMENT NUMBI	ER
	**PLEASE FILE THE ATTACHED AND RETURN**
xxxxxxxx	Plain Copy
	Certified Copy
	Certificate of Status
	**PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**  Certified Copy of Arts & Amendments  Certified Copy of Arts & Amendments Complete File (Including Annual Reports)  Certificate of Status  Certificate of Status Reflecting:
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COUNTRY OF DESTIN	

#### **Articles of Conversion**

For

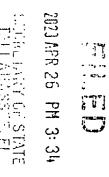
#### "Other Business Entity"

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:  PurpleLines Studio LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country)
06/11/2018 on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
PurpleLines Studio 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 26th day of April	20_23
Signature of Authorized Representative of Lim	
Signature of Authorized Representative: Warnell Printed Name: Lauren Underwood	tint
Signature of Authorized Representative:	Title: Attorney-in-Fact
Signature(s) on behalf of Other Business Entity:	
	[See below for required signature(s)]
Signature: Kamilikal	
Signature: Printed Name: Lauren Underwood	Title: Attorney-in-Fact
Signature:Printed Name:	era'. A
Printed Name:	Little:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	Title:
C:	
Signature:Printed Name:	Title:
Timed Name.	
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	065
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	
If Directors or Officers have not been selected, an in	icorporator must sign.
If Florida General Partnership or Limited Liabil	ity Partner <u>ship:</u>
Signature of one General Partner.	
·	
If Florida Limited Partnership or Limited Liabili	ity Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
2.5	
Fees:	
	72.00
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00

Certified Copy: Certificate of Status: \$30.00 (Optional) \$5.00 (Optional) 2023 APR 26 PM 3: 3 5 (A) / 12 Y OF STAI 5 (A) / 12 Y SSEE, FL

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
PurpleLines Studio LLC (Must contain the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
	, 2011, 2011, 1011,
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1541 Brickell Ave, Apt T112,	1541 Brickell Ave, Apt T112.
Miami FL 33129	Miami FL 33129
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	l Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the r	registered agent are:
Worldwide Corporate Adminis	
Name	
0000 David David Shel	
2330 Ponce De Leon Blvd Florida street address (P.O	Box NOT acceptable)
Coral Gables	FL <sup>33134</sup>
City	Zip
·	·
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p accept the obligations of my position as reg	o accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of alperformance of my duties, and I am familiar with and gistered agent as provided for in Chapter 605, F.S
	Underwood, Attorney-in-Fact
Registered Agent's Sign	nature (REQUIRED)

(CONTINUED)

2023 APR 26 PH 3: 34 SUCKLISSINGE STATE

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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	
MGR	JAIME ALBERTO RESTREPO
<del>.</del>	1541 Brickell Ave, Apt T112,
	Miami FL 33129
MGR	AMALIA CECILIA PULGAR URBANEJA
<del></del>	1541 Brickell Ave, Apt T112,
	Miami FL 33129
	<del></del>
(Use attachment if necessary)	
(	
RTICLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Lem Ullen	
Dan Chillian	

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 that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

JAIME ALBERTO RESTREPO, MGR, By: Lauren Underwood, Attorney-in-Fact

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)

SECTIVITY OF STATE