# L2300548072

(Requestor's Name)
(Address)
(Address)
(100.000)
(0) (0)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , , ,
(Document Number)
(Bocament Namber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

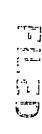
Office Use Only



000418937690

11/14/23--01043--015 \*\*185.00

2023 NOV 14 AM 9: 20



# **COVER LETTER**

TO: New Filing Section Division of Corporations	P
SUBJECT: Moonshine Media Group LLC	
(Name of Resulting Florida Limited Company)	
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Othe Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.  Please return all correspondence concerning this matter to:	:r
lan Blei	
(Contact Person)	
MOONSHINE MEDIA GROUP LLC	
(Firm/Company)	
303b Anastasia Blvd #2552	
(Address)	
St Augustine FL 32080	
(City, State and Zip Code)	
lan.blei@moonshinemediagroup.com	
E-mail Address: (to be used for future annual report notifications)	
For further information concerning this matter, please call:	
TAN BLEI at (720) 476-8659  (Name of Contact Person) (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)	}
\$150.00 Filing Fees  \$155.00 Filing Fees  \$180.00 Filing Fees  \$185.00 Filing Fees, Certified Copy, and Certificate of Status of Organization)	
Mailing Address:  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  Mailing Address:  New Filing Section  Division of Corporations  The Centre of Tallahassee  2415 N. Monroe Street, Suite 8107  Tallahassee, FL 32303	ميد.  او أو ال

## 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:  Moonshine Media Group ELC
(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)
05/24/2016 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:  Moonshine Media Group 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 7th day of November	20 23				
Signature of Authorized Representative of Limi	ted Liability Company:				
Signature of Authorized Representative:  Printed Name: I AN ISLET	Title: Oivoe(				
Signature(s) on behalf of Other Business Entity: [		•			
Signature:		-			
Printed Name: Ian Blei	<del>_</del>	•			
Signature: Printed Name:	Title:	<u>.</u> -			
Signature: Printed Name:	Title	-			
Signature: Printed Name:	Title:				
Signature: Printed Name:	Title:	-			
Signature: Printed Name:	Title:	· -			
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign.					
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	ty Partnership:				
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	ry Limited Partnership:				
All others: Signature of an authorized person.		. 2			
Fees:		2023 KOY	=== 1		
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	IL AM 9:			
		20 ATE			

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR	FLORIDA LIMA 122 22-1	
ARTICLE I - Name: The name of the Limited Liability Company	y is:	
Moonshine Media Group LLC (Must contain the words "Limited L	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of t	he principal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
303b Anastasia Blvo #2552 St. Augustine, FL 32080	303b Anastasia Blvd #2552 St. Augustine, FL 32080	
ARTICLE III - Registered Agent, Registre (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of		ent's Signature: individual or another
lan Blei	Name	
303b Anastasia Blvd #	2552 ss (P.O. Box <u>NOT</u> acceptable)	
	32080	
St. Augustine City	FL 32080 Zip	
Having been named as registered ager liability company at the place desig registered agent and agree to act in thi statutes relating to the proper and co accept the obligations of my position.  Registered Age	is copacity. I further agree to com	ply with the provisions of all and I am familiar with and

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

The name and we			
Company:	Name and Address:		
	Name and		
Title: "AMBR" = Authorized Member			
"MGR" = Manager	lan Blei		
AMBR			
AMBIN	St Augustine FL 32080		
		2023 NOV	
		23	
		OV 14 AM 9	ر مان در
(VIRESPOND:			!
(Use attachment if necessary)			
any if any			
ARTICLE V: Other provisions, if any.			
1			-
REQUIRED SIGNATURE:	1/ ~		
REQUIRED STORM			
	an authorized representative of	a member	
Signature of a member	er or an authorized representative of a representative of a representative of a representative of the representative of the programment of State constitutions are the programment of State constitutions.	es a third degree felony	
This document is executed in accou	er or an authorized representative of a reduce with section 605.0203 (1) (b), Florida State document to the Department of State constitution		

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.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)