# L24000 234348

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





900429543309

05/18/24--01017--023 \*\*150.00

## **COVER LETTER**

TO:	New Filing So Division of C					
SURI	FCT. Somethin	g New Films, LLC				
5000			ulting	Florida Limite	ed Con	npany)
				_		d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please	e return all corre	espondence concerning	g this	s matter to:		
Sandi	Falin					
		(Contact Person)				
		(Firm/Company)				
4602 (	County Road 673					
	U 51 00540	(Address)				
Bushn	ell, FL 33513	City State and Tin Code)				
sandio	رر trynsomethingn@	City, State and Zip Code)				
		e used for future annual rep	port n	otifications)		
For fu	rther information	on concerning this mat	ter, ¡	please call:		
Sandi	Falin		at (	702	,528-2	2924
	(Name of Conta	ct Person)		(Area Code)	(Day	time Telephone Number)
		or the following amou a bank located in the		-	rocess	ed by this office must be payable in US
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles anization)	□\$155.00 Filing Fees and Certificate of Status		\$180.00 Filing Certified Cop		☐\$185.00 Filing Fees, Certified Copy. and Certificate of Status
	Mailing Addr New Filing So Division of C P.O. Box 632 Tallahassee, F	ection orporations 7			New I Divisi The C 2415 i	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 hassee, 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.

Something New Films, 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.)
(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)
05/14/2012 on .
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:
Something New Films, 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 7 day of May	_ 20 <u>24</u>
Signature of Authorized Representative of Limi	
Signature of Authorized Representative:	Mdi Talis_ Title: Manager
Signature(s) on behalf of Other Business Entity:	
Signature: James Falin Printed Names James Falin	Title: Mayvager
Signature:	
Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	791.1
Printed Name:	litle:
Signature:	
Signature: Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty 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)

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I -	· Name: he Limited Liability Com	iany ic
The name of t	ne Emmed Elability Com	ally 15.
Something Nev	v Films, LLC	
	(Must contain the words "Limit	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II The mailing a		f the principal office of the Limited Liability Company
<u>Principal Off</u>	ice Address:	Mailing Address:
4602 County B	oad 673 #12537	
4002 County in	0au 0/3 #1233/	4602 County Road 673 #12537
Bushnell, FL 33	3513	Bushnell, FL 33513
ARTICLE II (The Limited Liab) business entity wi	I - Registered Agent, Registered Agent, Registered Agent, Registry Company cannot serve as its of the an active Florida registration.)  the Florida street address	<del></del>
ARTICLE II (The Limited Liab) business entity wi	I - Registered Agent, Registre as its country Company cannot serve as its country and active Florida registration.)	Bushnell, FL 33513  gistered Office, & Registered Agent's Signature: win Registered Agent. You must designate an individual or another
ARTICLE II (The Limited Liab) business entity wi	I - Registered Agent, Registered Agent, Registered Agent, Registry Company cannot serve as its of the an active Florida registration.)  the Florida street address  Karen Byassee  603 63rd Avenue W L	Bushnell, FL 33513  gistered Office, & Registered Agent's Signature: win Registered Agent. You must designate an individual or another of the registered agent are:  Name  of R2
ARTICLE II (The Limited Liab) business entity wi	I - Registered Agent, Registered Agent, Registered Agent, Registry Company cannot serve as its of the an active Florida registration.)  the Florida street address  Karen Byassee  603 63rd Avenue W L	Bushnell, FL 33513  gistered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another  of the registered agent are:  Name  ot R2  ss (P.O. Box NOT acceptable)
ARTICLE II (The Limited Liab) business entity wi	I - Registered Agent, Registered Agent, Registered Agent, Registry Company cannot serve as its of the an active Florida registration.)  the Florida street address  Karen Byassee  603 63rd Avenue W L	Bushnell, FL 33513  gistered Office, & Registered Agent's Signature: win Registered Agent. You must designate an individual or another of the registered agent are:  Name  of R2

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

### **ARTICLE IV-**

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	
Manager	Sandi Falin
	4602 County Road 673 #12537
	Bushnell, FL 33513
	· · · · · · · · · · · · · · · · · · ·
Manager	James Falin
	4602 County Road 673 #12537
	Bushnell, FL 33513
(Use attachment if necessary)	
(Ose attachment if necessary)	
CLE V. Other provisions if any	
CLE V: Other provisions, if any.	
<u>REQUIRED</u> SIGNATURE:	
	an authorized representative of a member
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware th
any false information submitted in a docur as provided for in s.817.155, F.S.	ment to the Department of State constitutes a third degree felo
as provided for in s.617.135.1.3.	1.
Sandi Falin ( ) ( ) ( )	ll talm
Ty	ped or printed name of signee
- 51	Filing Foor

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)

1.

SECRETARY OF STATE



# NEVADA STATE BUSINESS LICENSE

SOMETHING NEW FILMS, LLC

# Nevada Business Identification # NV20121306306 Expiration Date: 05/31/2024

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

Valid until the expiration date listed unless suspended, revoked or cancelled in accordance with the provisions in Nevada Revised Statutes. License is not transferable and is not in lieu of any local business license, permit or registration.

License must be cancelled on or before its expiration date if business activity ceases. Failure to do so will result in late fees or penalties which, by law, cannot be waived.

Certificate Number: B202305293685089

You may verify this certificate online at http://www.nvsos.gov

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on 05/29/2023.

FVAquelan

FRANCISCO V. AGUILAR Secretary of State