

12400049/410

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

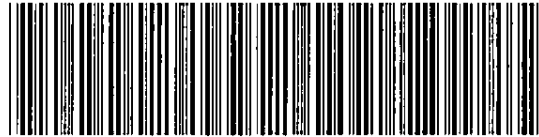
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/19/24--01035--008 **150.00

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TALLAHASSEE, FL

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TALLAHASSEE, FL

MS

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Virtu studios LLC

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Amanda Hartman

(Contact Person)

Virtu studios

(Firm/Company)

10950-60 San Jose Blvd. # 235

(Address)

Jacksonville FL 32223

(City, State and Zip Code)

mandy@virtu-studios.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Rob Martin

(Name of Contact Person)

at (904) 614-3282

(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)

- | | | | |
|------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|---------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization) | <input type="checkbox"/> \$155.00 Filing Fees
and Certificate of
Status | <input type="checkbox"/> \$180.00 Filing Fees
and Certified Copy | <input type="checkbox"/> \$185.00 Filing Fees,
Certified Copy, and
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

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STATE

Articles of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company

The Articles of Conversion **and attached Articles of Organization** 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:

Virtu Studios

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a LLC

(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of North Carolina

(Enter state, or if a non-U.S. entity, the name of the country)

on 7/18/2022

(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

Virtu Studios

(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.

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TALLAHASSEE, FL

Signed this 12 day of November 2024.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: [Signature]
Printed Name: Rob Martin Title: CEO

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: [Signature]
Printed Name: Amanda Hartman Title: COO

Signature: _____
Printed Name: _____ Title: _____

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 Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

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)

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HALL COUNTY, FL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Virtu Studios LLC

(Must contain the words "Limited Liability Company," "LLC," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

10950-60 San Jose Blvd #235
Jacksonville FL 32223

Mailing Address:

same as principal

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Rob Martin

Name

3342 Laurel Grove N

Florida street address (P.O. Box **NOT** acceptable)

Jacksonville

City

FL

32223

Zip

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.,

Rob Martin

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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CLERK OF DISTRICT COURT
JACKSONVILLE, FL

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

AMBR

Name and Address:

Rob Martin

3342 Laurel Grove M

Jacksonville FL 32223

Amanda Hartman

3342 Laurel Grove M

Jacksonville FL 32223

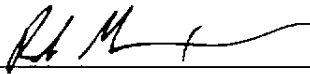
(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL

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REQUIRED SIGNATURE:



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.

Rob Martin

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)



NORTH CAROLINA

Department of the Secretary of State

To all whom these presents shall come, Greetings:

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify the following and hereto attached to be a true copy of

ARTICLES OF INCORPORATION

OF

VIRTU STUDIOS, INC.

the original of which was filed in this office on the 18th day of July, 2022.

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2024 NOV 19 PM 1:08
NORTH CAROLINA
SECRETARY OF STATE
RALEIGH, NC

IN WITNESS WHEREOF, I have hereunto set
my hand and affixed my official seal at the City
of Raleigh, this 6th day of November, 2024.

Elaine F. Marshall

Secretary of State



Scan to verify online.

State of North Carolina
Department of the Secretary of State

ARTICLES OF INCORPORATION

SOSID: 2453755
Date Filed: 7/18/2022 12:27:00 PM
Elaine F. Marshall
North Carolina Secretary of State
C2022 182 00652

Pursuant to §55-2-02 of the General Statutes of North Carolina, the undersigned does hereby submit these Articles of Incorporation for the purpose of forming a business corporation.

1. The name of the corporation is: Virtu Studios, Inc.
2. The number of shares the corporation is authorized to issue is: 1000
3. These shares shall be: (*check either a or b*)
 - a. ☒ All of one class, designated as common stock; or
 - b. ☐ Divided into classes or series within a class as provided in the attached schedule, with the information required by N.C.G.S. Section 55-6-01.
4. The name of the initial registered agent is: Robert Martin
5. The North Carolina street address and county of the initial registered office of the corporation is:
Number and Street 150 Coxe Ave , Apt 505
City Asheville State NC Zip Code 28801 County Buncombe
6. The mailing address, *if different from the street address*, of the initial registered office is:
Number and Street _____
City _____ State NC Zip Code _____ County _____
7. Principal office information: (*must select either a or b.*)
 - a. ☐ The corporation has a principal office.
The principal office telephone number: _____
The street address and county of the principal office of the corporation is:
Number and Street _____
City _____ State _____ Zip Code _____ County _____
The mailing address, *if different from the street address*, of the principal office of the corporation is:
Number and Street _____
City _____ State _____ Zip Code _____ County _____
 - b. ☒ The corporation does not have a principal office.

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8. Any other provisions, which the corporation elects to include, i.e., the purpose of the corporation, are attached.
9. The name and address of each incorporator is as follows:

Name	Address
Robert Martin	150 Coxe Ave, Apt 505, Asheville, NC 28801
Ryan Watts	2017 Robin Wood Rd. Newton, NC 28658

10. **(Optional):** Listing of Company Officers (See instructions on why this is important)

Name	Address	Title
Robert Martin	150 Coxe Ave, Apt 505, Asheville, NC 28801	CEO
Ryan Watts	2017 Robin Wood Rd., Newton, NC 28658	CFO

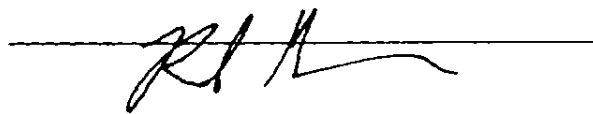
11. **(Optional):** Please provide a business e-mail address

Privacy Redaction

The Secretary of State's Office will e-mail the business automatically at the address provided at no charge when a document is filed. The e-mail provided will not be viewable on the website. For more information on why this service is being offered, please see the instructions for this document.

12. These articles will be effective upon filing, unless a future date is specified:

This the 21st day of June 20 22



Signature

Robert Martin, CEO

Type or Print Name and Title

NOTES:

1. Filing fee is \$125. This document must be filed with the Secretary of State.

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CLERK OF STATE
TALLAHASSEE, FL



NORTH CAROLINA

Department of the Secretary of State

CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

VIRTU STUDIOS, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 18th day of July, 2022, with its period of duration being Perpetual.

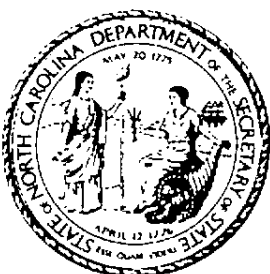
I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.

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NORTH CAROLINA
TALLAHASSEE, FL

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 6th day of November, 2024.

Elaine F. Marshall

Secretary of State



Scan to verify online.