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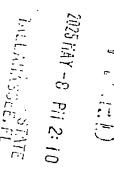
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COVER LETTER

TO: New Filing Section Division of Corpora	itions						
SUBJECT: Tamarac News	, LLC / P24000002	126	6				
30bJEC1	(Name of Resu	lting	g Florida Limit	ed Com	pany)		
The enclosed Articles of Co Business Entity" into a "Flo							ı "Other
Please return all correspond	dence concerning	thi	s matter to:				
Filings Team							
(Cor	itact Person)			•		,	~
Northwest Registered Agent	LLC					<u> </u>	1 520
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flfilings@northwestregistered	agent.com					,	
E-mail Address: (to be used	for future annual rep	orti	notifications)	-			
For further information cor	ncerning this matt	сг.	please call:				
Filings Team		at	(_509	768-2	2249		
(Name of Contact Pers	on)		(Area Code)	(Day	time Telephone Number)		
Enclosed is a check for the dollars and drawn on a ban				rocess	ed by this office must be	e payable	in US
	55.00 Filing Fees Certificate of s		\$180.00 Filing d Certified Cop		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
Mailing Address: New Filing Section Division of Corpora P.O. Box 6327 Tallahassee, FL 321	ntions			New F Divisi The C	Address: Filing Section on of Corporations entre of Tallahassee N. Monroe Street, Suite	810	

Tallahassee, 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Tamarac News Inc. / P24000002126
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of FL (Enter state, or if a non-U.S. entity, the name of the country)
on 1/09/2024 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Tamarac News 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.

All others: Signature of an authorized person. Fees: Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: \$25.00 \$125.00 \$30.00 (Optional)	Signed this 23rd day of April	20_25
Signature of Authorized Representative: Clbery Mike Helin	Signature of Authorized Representative of Limi	ted Liability Company:
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature:	CAR	m.ha Hali
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature:	Signature of Authorized Representative:	ng mike seein
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature:	Printed Name: Elberg Mike Gelin	
Signature: Printed Name: Printed Name: Printed Name: Title: Signature: Printed Name: Title: If Florida Corporation: Signature of 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: Fees for Florida Articles of Organization: S125.00 Certified Copy: S30.00 (Optional)		
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Signature: Printed Name: Printed Name: Title: 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, 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: Fees for Florida Articles of Organization: S125.00 Certified Copy: S30.00 (Optional)	Printed Name: Liberg Wike Selin	Tille: 1103ddik
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Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00 Certified Copy: \$30.00 (Optional)	Signature of an authorized person.	
Fees for Florida Articles of Organization: \$125.00 Certified Copy: \$30.00 (Optional)	Fees:	
Fees for Florida Articles of Organization: \$125.00 Certified Copy: \$30.00 (Optional)	Articles of Conversion	\$25.00
Certified Copy: \$30.00 (Optional)		
• •		
Certificate of Status.	Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited Liability Company is:	
Tamarac News, LLC	
(Must contain the words "Limited Liabilit	y Company, "L.L.C.," or "L.LC.")
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7154 University Drive	7154 University Drive
#104	#104
Tamarac, FL 33321	Tamarac, FL 33321
business entity with an active Florida registration.) The name and the Florida street address of the residual street address of the residual street.	
Northwest Registered Agent I	
Name	e
7901 4th St N STE 300	
Florida street address (P.C	. Box NOT acceptable)
St. Petersburg	FL 33702
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	o accept service of process for the above stated limited this certificate. I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 605, F.S
Registered Agent's Sign	TALL
(CONTIN	M-8 PH 2:10

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	Out a Fiber Mile
MGRM	Gelin, Elberg Mike
	7154 N University Drive #104
	Tamarac, FL 33321
	<u> </u>
	2025
// / / / / / / / / / / / / / / / / / /	
(Use attachment if necessary)	, 100 (
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TICLE V: Other provisions, if any.	
•	

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.

Nat Smith _____

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)