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PICK-UP WAIT MAIL
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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 7, 2023

MICHAEL F. OLSZEWSKI 86549 NASSAU CROSSING WAY YULEE, FL 32097 US

SUBJECT: NORTHEAST OHIO BROADCAST ARCHIVE CORP. Ref. Number: W23000163984

We have received your document for NORTHEAST OHIO BROADCAST ARCHIVE CORP, and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Florida law requires any business entity serving in the capacity of a registered agent to have an active registration or filing on our records.

THE MUS BE 3 DIRECTORS LISTED FOR NON-PROFITS ONCE 1 DIRECTOR IS LISTED. PLEASE SEE HIGHLIGHTED SECTIONS TO BE COMPLETED



COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: NORTHEAST	OHIO BROADCAST ARCHIV	E Com. DRATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)		
Enclosed is an original ar	nd one (1) copy of the Arti	icles of Incorporation and	a check for:	3	
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL CO	PY REQUIRED		
FROM:	Michael F. Olszewski Nar	me (Printed or typed)		-	
	86549 Nassau Crossing Way	y Address	_		
		Address			
	Yulee, Florida 32097	City, State & Zip	_	75. 17.	7073

(904) 849 - 7487

jannmike1978@gmail.com

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

Certificate of Conversion
For
Other Business Entity*
Into
Plorida Profit Corporation
Non Profit

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

The contract of the contract o	
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is	
NORTHEAST OHIO BROADCAST ARCHIVE Inc.	
Enter Name of Other Business Entity	
2. The "Other Business Entity" is a Limited Liability Company (Faster entity type - Example: limited liability company, fimited partnership,	
2. The "Other Business Entry is a	
Florida	
first organized, formed or incorporated under the laws of	
on 10/4/2023	
on Enter date "Other Business Entity" was first organized, formed or incorporated	
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which organized, formed or incorporated:	
4. The name of the Florida Protit-Corporation as set forth in the attached Articles of Incorporation:	
NORTHEAST OHIO BROADCAST ARCHIVE Corp.	
Enter Name of Florida Profit Corporation	
5. If not effective on the date of filing, enter the effective date: 11/17/2023 (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will listed as the document's effective date on the Department of State's records.	e Florida

Page 1 of 2

3(-7)12 77 8:47 6. 35 ATE

November Signed this HON Frofit Required Signature for Florida Prefit Corporation: Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, and Incorporator: Michael F. Olszewski Printed Name: Michael F. Olszewski Title: Executive Director Required Signa (hre(s) on behalf of Other Business Entity: [See below for required signature(s).] Signature: Printed Name: Signature: Printed Name: Signature: _ Printed Name: Title: ___ Signature: _ Title: ___ Printed Name:__ If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Plorida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. If Florida Limited Liability Company: Signature of a Member or Authorized Representative. All others: Signature of an authorized person.

Page 2 of 2

\$35.00

\$70.00

\$8,75 (Optional)

\$8.75 (Optional)

Fees:

Certificate of Conversion:

Certified Copy:

Certificate of Status:

Fees for Florida Articles of Incorporation:

STATE STATE

Service Service

ARTICLES OF INCORPORATION In compliance with Chapter 617, F.S., (Not for Profit)

RTICLE II	<u>PRINCIPAL OFFICE</u>			
	Principal street address:		Mailing address, if different is:	
86549	Nassau Crossing Way			
Yulee	Florida 32097	PP		
	which the corporation is organized is:		al of the Northeast Ohio Broadcast Ar	<u></u>
locate, preserv	e, log and make available to the public radio a	and TV footage fro	m Northeast Ohio's past. The archive	e will offer a
unique historio	al perspective through audio and video based	on events covere	d by news media and personalities w	no helped
shape the loca	I media scene. The results will be offered fro	e for historical res	earch to non-commercial entities and	the public
though library	access or similar availability. The archive wil	Il pay close attenti	on to copyrights, intellectual property.	mu s ic
rights, etc.	access of Shrinai availability. The archive with	pay dioda accord		
ngms, oc.				
				
RTICLE IV	MANNER OF ELECTION The manner	in which the direc	tors are elected and appointed:	
	MANNER OF ELECTION The manner appointed based on previous professional ea			
Directors will be	e appointed based on previous professional e	xpedence in the m		
Directors will be		xpedence in the m		_
Directors will be	e appointed based on previous professional e	xperience in the m	edia.	
Directors will be RTICLE V	e appointed based on previous professional e	xperience in the m		
Directors will be RTICLE V Iame and Title:	e appointed based on previous professional en INITIAL OFFICERS AND/OR DIRECTO Michael F. Olszewski, Executive Director 86549 Nassau Crossing Way	xperience in the more and Title:	edia. James Mehrling, Olrector	_
Directors will be RTICLE V Iame and Title:	e appointed based on previous professional ex INITIAL OFFICERS AND/OR DIRECTO Michael F. Olszewski, Executive Director	xperience in the more and Title:	edia. James Mehrling, Director 412 Girard Avenue	
NATICLE V Value and Title: Address	INITIAL OFFICERS AND/OR DIRECTO Michael F. Olszewski, Executive Director 86549 Nassau Crossing Way Yulee, Florida 32097	PRS Name and Title:	James Mehrling, Director 412 Girard Avenue Berea, Ohio 44017	
Pirectors will be PATICLE V Name and Title: Address	INITIAL OFFICERS AND/OR DIRECTO Michael F. Olszewski, Executive Director 86549 Nassau Crossing Way Yulee, Florida 32097	Name and Title: Address:	James Mehrling, Director 412 Girard Avenue Berea, Ohio 44017	
Pirectors will be PATICLE V Name and Title: Address	E appointed based on previous professional elements of the professional el	PRS Name and Title:	James Mehrling, Director 412 Girard Avenue Berea, Ohio 44017 JoAnn Larson, Officer	
RTICLE V Name and Title:	Michael F. Olszewski, Executive Director 86549 Nassau Crossing Way Yulee, Florida 32097 Cliff Baechle, Officer D 172 & CTO	Name and Title: Address:	James Mehrling, Director 412 Girard Avenue Berea, Ohio 44017 JoAnn Larson, Officer PO Box 55	
Name and Title: Name and Title: Address	Michael F. Olszewski, Executive Director 86549 Nassau Crossing Way Yulee, Florida 32097 Cliff Baechle, Officer D 172 C CTO 22 Talcott Pines Plymouth, Massachusetts 02360	Name and Title: Address: Name and Title: Address:	James Mehrling, Director 412 Girard Avenue Berea, Ohio 44017 JoAnn Larson, Officer PO Box 55	
Name and Title: Address Name and Title: Address	Michael F. Olszewski, Executive Director 86549 Nassau Crossing Way Yulee, Florida 32097 Cliff Baechle, Officer D 172 & CTO 22 Talcott Pines Plymouth, Massachusetts 02360 Janice, Olszewski, Secretary / Treasurer	Name and Title: Address: Name and Title: Address:	James Mehrling, Director 412 Girard Avenue Berea, Ohio 44017 JoAnn Larson, Officer PO Box 55 Bath, Ohio 44210	S
RTICLE V Name and Title: Address	Michael F. Olszewski, Executive Director 86549 Nassau Crossing Way Yulee, Florida 32097 Cliff Baechle, Officer D 172 C CTO 22 Talcott Pines Plymouth, Massachusetts 02360	Name and Title: Address: Name and Title: Address:	James Mehrling, Director 412 Girard Avenue Berea, Ohio 44017 JoAnn Larson, Officer PO Box 55 Bath, Ohio 44210 Gary Cerasl, Officer	

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Name and Title:_		Name and Title:	·	
Address				
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Name and Title:_		Name and Title:		
Address		Address:		
-				
The name and Flo	<i>REGISTERED AGENT</i> orlda street address (P.O. Box N		i agent is:	
Name:	MICHAEL FIDES	STEWSKI		
Address:	84549 NASSA	U 020551NG W	124	
дошезз.	YULFE, FLORIZ	A 32097		
	INCOMMONATOR			
The name and ad	INCORPORATOR Idress of the incorporator is:			
	Michael F. Olszewski			
Name:		ay		
	Michael F. Olszewski 86549 Nassau Crossing W			
Name: Address:	Michael F. Olszewski 86549 Nassau Crossing W Yulee, Florida 32097			
Name: Address: ARTICLE VIII	Michael F. Olszewski 86549 Nassau Crossing W Yulee, Florida 32097 EFFECTIVE DATE:		. (OPTIONAL)	: fi)lo
Name: Address: ARTICLE VIII Effective date, if (If an effective date)	Michael F. Olszewski 86549 Nassau Crossing W Yulee, Florida 32097 EFFECTIVE DATE: other than the date of filing: date is listed, the date must be:	specific and cannot be more th		: Alio
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