

P23000056801

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

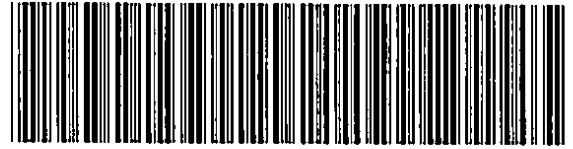
(Business Entity Name)

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Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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1)

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

TALLAHASSEE, FL 32309

(850) 524-5437

(850) 524-6243

Please use funds from this account: I20210000160: \$105.00

Authorization Signature: *Janice*

MUBS SOLUTION, LLC

BUSINESS NAME

DOCUMENT #

Certified Copy

Certificate of Status

**NEW FILINGS**

Profit Corp

Not for Profit

**Limited Liability**

Domestication

Other

CORP

LLLP

**AMMENDMENTS**

Amendment

Resignation of R.A. Officer/Director

Change of Registered Agent

Revocation of Dissolution

Merger

Articles of Conversion

Amended and restated Articles

Statement of Authority

**OTHER FILINGS**

Annual Report

Fictitious Name

APOSTILLE

Country

**REGISTRATION/QUALIFICATIONS**

Foreign filing

Qualification for LLP

Reinstatement

Other

EXAMINER'S INITIALS: \_\_\_\_\_

FLORIDA CAPITAL COURIER SERVICES, INC

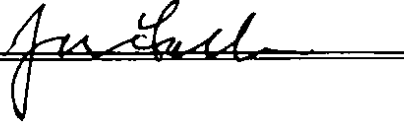
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**EXAMINER'S INITIALS:** \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 1, 2023

FLORIDA CAPITAL COURIER SERVICES, INC

SUBJECT: MUBS SOLUTION, LLC  
Ref. Number: W23000104418

We have received your document for MUBS SOLUTION, LLC. However, the document has not been filed and is being returned for the following:

The Certificate of Conversion must contain the name of the limited liability company as set forth in the attached articles of organization.

The articles of conversion must be fully and correctly filled out to be filed.,

If you have any further questions concerning your document, please call (850) 245-6052.

KAIN COSTELLO  
Regulatory Specialist II  
New Filing Section

Letter Number: 323A00017250

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TALLAHASSEE, FLORIDA  
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**Articles of Conversion**  
For  
**Converting Eligible Entity**  
Into  
**Florida Profit Corporation**

The Articles of Conversion **and attached Articles of Incorporation** are submitted to convert the following **eligible business entity into a Florida Profit Corporation** in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:

**MUBS SOLUTIONS, LLC**

Enter Name of the Converting Entity

2. The converting entity is a **LLC**  
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of **FLORIDA**  
(Enter state, or if a non-U.S. entity, the name of the country)

on **05/09/2022**  
Enter date "Converting Entity" was first organized, formed or incorporated.

3. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

**MUBS SOLUTIONS, CORP.**  
Enter Name of Florida Profit Corporation

4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.

5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_  
(The effective date: Cannot be prior to nor more than 90 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.

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Signed this 28 day of JULY, 202023.

**Required Signature for Florida Profit Corporation:**

Signature of Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:

RENILSON CRUZ VIANA

Printed Name: RENILSON CRUZ VIANA Title: PRESIDENT

**Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies:** [See below for required signature(s).]

Signature: RENILSON CRUZ VIANA

Printed Name: RENILSON CRUZ VIANA Title: MGR

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**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.

**If Florida Limited Liability Company:**

Signature of a Member or Authorized Representative.

**All others:**

Signature of an authorized person.

**Fees:**

Articles of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

**ARTICLES OF INCORPORATION  
FOR RESULTING FLORIDA PROFIT CORPORATION  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)**

**ARTICLE I    NAME**

The name of the corporation shall be: MUBS SOLUTIONS, CORP,

**ARTICLE II    PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

Principal street address

Mailing address, if different is:

5111 NE 18TH AVE APT 04  
FORT LAUDERDALE, FL 33334

5111 NE 18TH AVE APT 04  
FORT LAUDERDALE, FL 33334

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is:

GENERAL SERVICES

**ARTICLE IV    SHARES**

The number of shares of stock is: 100

**ARTICLE V    OFFICERS AND/OR DIRECTORS**

Name and Title: RENILSON CRUZ VIANA - PRESIDENT

Name and Title: \_\_\_\_\_

Address: 5111 NE 18TH AVE APT 04  
FORT LAUDERDALE, FL 33334

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_



**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: RENILSON CRUZ VIANA

Address: 5111 NE 18TH AVE APT 04

FORT LAUDERDALE, FL 33334

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

RENILSON CRUZ VIANA

Required Signature/Registered Agent

07/28/2023

Date

2023 JUL -2 PM 1:54

LD