# L09000013911

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

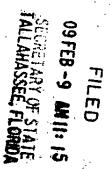




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B. KOHR
FEB 11 2009
EXAMINER



#### **COVER LETTER**

TO: Registration Section

Tallahassee, FL 32301

**Division of Corporations** 

#### SUBJECT: MERCHANT NETWORKING SOLUTIONS LLC

(Name of Resulting Florida Limited Company)

The enclosed Certificate 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. 608.439, F.S.

Please return all correspondence concerning this matter to:

Michael Usbelger			
	(Contact Person)		-
	(Firm/Company)		125
12300 South Shore Bl	vd, Suite 222		至
	(Address)		SE SE
Wellington, Florida 33	414		F4
(1	City, State and Zip Code)		9.5
For further informati	on concerning this ma	tter, please call:	
Michael Usbelger			3948
(Name of Contact Person)		(Area Code and D	aytime Telephone Number)
Enclosed is a check t	for the following amou	int:	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	<b>■</b> \$180.00 Filing Fees and Certified Copy	□\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS:		MAILING A	ADDRESS:
Registration Section		Registration	
Division of Corporations		Division of C	
Clifton Building		P. O. Box 63	
2661 Executive Center Circle		Tallahassee,	FL 32314

#### **Certificate of Conversion**

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted convert the following "Other Business Entity" into a Florida Limited Liability **Company** in accordance with s.608.439, Florida Statutes. 1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: Merchant Networking Solutions Inc. PU300009 (Enter Name of Other Business Entity) 2. The "Other Business Entity" is a corporation (Enter entity type. Example: corporation, limited partnership, sole proprietorship, ANT 20, 200} 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 August 21 2003 effective August 20, 2003 (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 it is now organized, formed or incorporated: 4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Merchant Networking Solutions LLC (Enter Name of Florida Limited Liability Company) 5. If not effective on the date of filing, enter the effective date:

(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is

listed therein.)

Signed	this 4th	day of February	20_09	
Signat	ure of Memb	er or Authorized Repres	sentative of Limited Liability Compan	<u>y:</u>
		r or Authorized Represent el Usbelger		<b>=</b>
Signatu	ıre(s) on beha	olf of Other Business Enti	ity: [See below for required signature(s	).]
Signatu	re:	OP.	>	
		el Usbelger	Title: President	
Signatu	ire.			
Cianatu	mai			
Printed	Name:	<u> </u>	Title:	
Signatu Printed	re:		Title:	
Signatu	re:		Title	
rimed	Name		Title:	
Printed	Name:		Title:	
Signatu		on: n, Vice Chairman, Director s have not been selected, a		
II Direc	nois of Office	s have not occur selected, a	an meorporator must sign.	
	da General P re of one Gene	artnership or Limited Lis eral Partner.	iability Partnership:	
		artnership or Limited Lia eneral Partners.	ability Limited Partnership:	
All other	ers: re of an author	rized person.		
Fees:				
	Certificate of Fees for Flori Certified Cop Certificate of	da Articles of Organizationy:	\$25.00 on: \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

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

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

#### Merchant Networking Solutions LLC

(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC.")

#### **ARTICLE II - Address:**

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

## Principal Office Address: 12300 South Shore Blvd 12300 South Shore Blvd

Suite 222 Wellington, Florida 33414

Wellington, Florida 33414

Suite 222

### 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:

Michael Usbelger
Name

12300 South Shore Blvd, Suite 222

Florida street address (P.O. Box <u>NOT</u> acceptable)

Wellington FL 33-City, State, and 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 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

#### 'ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGRM	Michael Usbelger 13898 Greentree Trail Wellington, FL 33414			
MGRM	Nancy Usbelger 13898 Greentree Trail Wellington, FL 33414			
	(Use attachment if necessary)			
locument is filed by the Florida Departi	(OPTIONAL) o nor more than 90 days after the date this ment of State; AND 2) must be the same as Certificate of Conversion, if an effective			
Signature of a member or an authorized representative of a member.  (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)				
Michael Usbelger  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)