L09000068582

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

Office Use Only



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C. LEWIS

JUL 17, 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: The Bostonian Group 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:
William Rodriguez (Contact Person)
National Payment Modification (Firm/Company)
121 South Orange Ave suite 1410 (Address)
Orlando, FL, 32801 (City, State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) (Name of Contact Person) (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$150.00 Filing Fees and Certificate of Status \$180.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS:MAILING ADDRESS:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsClifton BuildingP. O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 8, 2009

WILLIAM RODRIGUEZ / NATIONAL PAYMENT MODIFICATION 121 S. ORANGE AVE. SUITE 1410 ORLANDO, FL 32801

SUBJECT: THE BOSTONIAN GROUP LLC

Ref. Number: W09000031415

We have received your document for THE BOSTONIAN GROUP LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please fill out the second page of the conversion. We must have the signatures for both entities.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 209A00023375

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

FILED
2009 JUL 16 AM 8: 25
SECRETARY OF STATE TALLAHASSEE, FLORIDA

This Certificate 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.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:
The Bostonian Group Inc
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
first organized, formed or incorporated under the laws of <u>florida</u>
(Enter state, or if a non-U.S. entity, the name of the country)
on 7-1-2009 (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:
The Bostonian Group 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; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)

	. 0	FILED
Signed this day of	2009	09 JUL 16 AM 8: 25
Signature of Member or Authorized Representa		
Signature of Member or Authorized Representative Printed Name: William Zounguez		SECRETARY OF STATE LELAHASSEE, FLORIDA -
Signature(s) on behalf of Other Business Entity:	See below for required signature(s).	
Signature:		_
Printed Name: willma Rediguez	Title: M (a 12	_
Signature:		_
Printed Name:	Title:	-
Signature:		_
Printed Name:	Title:	-
Signature:Printed Name:		_
Printed Name:	Title:	_
Signature:		_
Signature: Printed Name:	Title:	-
Signature:		_
Printed Name:	Title:	_
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an Inc.		
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$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	:
THE BOSTONIAN GROUP LLC	
(Must end with the words "Limited Liabi	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
117 East Ameila St. Orlando, FL 32001	117 Fast Ameila St Orlando, FL 32801
ADTICLE HE D. LA. A.D. LA.	1000 0 0 11 11 11 11 11 11

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:

Incorp Services, Inc. Name

17888 67th Court North

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

FL 33470
City, State, and Zip Loxahatchee

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..

uce Null on behalf of Incorp Services, Inc.
Registered Agent & Signature (REQUIRED)

(CONTINUED) Page 1 of 2

FILED

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

	Name and Address:	2009 JUL 16 AM 8: 2
'MGR" = Manager 'MGRM" = Managing Member		SECRETARY OF STAT TAULAHASSEE, FLORI
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MC-R	14355 TAMBOUTH	Le Do
	Original FL 32837	
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·		<u> </u>
	(Use attachment if necessary)	<u></u>
EV: Effective date, if other than the	e date of filing:	·
	(OPTIONAL)	
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