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Holland & Knight	
Requester's Name 315 South Calhoun Street, suite	e 600
Acdress	··········
Tallahassee, FL 32301 (850)425	5-5686
City/State/Zip Phone #	
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	Office Use Only
CORPORATION NAME(S) & DOCUMEN	T NUMBER(S), (if known):
Λυ	TNUMBER(S), (if known):
1. Alliance Retail Marke	true Group
(Corporation Name)	O (Document 2)
2.	
(Corporation Name)	(Document#)
(Corporation Name)	(Document #)
4. (Corporation Name)	(Document#)
_	
Walk in Pick up time	Certified Copy
Mail out Will wait	Photocopy Certificate of Status
NEW FILINGS	AMENDMENTS
Profit	Amendment
Not for Profit	Resignation of R.A., Officer/Director Change of Registered Agent
<ul><li>Limited Liability</li><li>Domestication</li></ul>	Dissolution/Withdrawal
	Merger
	DECISED ATION/OITALIEICATION
OTHER FILINGS	REGISTRATION/QUALIFICATION
<u> </u>	Foreign
— · · · · · · · · · · · · · · · · · · ·	Limited Partnership Reinstatement
	Trademark
	Other
CR2E031(7/97)	Examiner's Initials

P1100090216

## For "Other Business Entity" Into

#### Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.695.1045, Florida Statutes.

"Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.2045, Florida Statutes.
1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion S: Alliance Retail Marketing Group, Inc.
(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
(Enter state, or if a non-U.S. entity, the name of the country)
October 14, 2011 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Alliance Retail Marketing Group, 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.

Signed this 13th day of December	20 18	
Signature of Authorized Representative of Lim	ited Liability Company:	
Signature of Authorized Representative:  Printed Name: Francisco Grande	Title: President	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	
Signature:		
Printed Name: Carmen Sabater	Title: Chief Financial Officer	= 6
Signature		Fig. B.
Signature:Printed Name:	Title:	題こ
		H.SSEE
Signature: Printed Name:	Title:	ma. T
		35
Signature: Printed Name:	Title:	
Signature: Printed Name:	Title:	
Signature: Printed Name:	Title	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	Officer	
If Directors or Officers have not been selected, an Ir		
If Florida General Partnership or Limited Liabil Signature of one General Partner.		
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	ity Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		

Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: Certified Copy: Certificate of Status: \$125.00

\$30.00 (Optional) \$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

orincipal office of the Limited Liability Company is:
principal office of the Limited Liability Company is:
principal office of the Limited Liability Company is:
. , , , , , , , , , , , , , , , , , , ,
Mailing Address:
P.O. Box 144120
Coral Gables, FL 33134
d Office, & Registered Agent's Signature:
stared Agent. Vou must decignate an individual or another?
ed Office, & Registered Agent's Signature: stered Agent. You must designate an individual or another.
2,
registered agent are:
2,
2,
registered agent are:
registered agent are:  ne  D. Box <u>NOT</u> acceptable)
registered agent are:  ne  D. Box NOT acceptable)  F1, 33134

Registered Agent's Signature (REQUIRED)

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
MGR	Francisco Grande	
	2701 S LeJuene Rd., 12th Floor	
	Coral Gables, FL 33134	
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	2000年	
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	<u></u>	
(Use attachment if necessary)		
CLE V: Other provisions, if any.		
	· · · · · · · · · · · · · · · · · · ·	

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.

Francisco Grande, President

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)