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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W210000 32374

Office Use Only



300361410313

03/08/21--01003--007 **150.00



CORPORATE When you need ACCESS to the world ACCESS, ____ INC. 236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666 **WALK IN** PICK UP: 03/05/2021 **CERTIFIED COPY** XX **PHOTOCOPY** П **CUS** XX FILING CONVERSION M & R MULTI SERVICES LLC (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

(CORPORATE NAME AND DOCUMENT #)

SPECIAL

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INSTRUCTIONS:

COVER LETTER

TO: New Filing Division of	Section Corporations		
SUBJECT: M&R	MULTI FINANCIAL SER	VICES LLC	
	(Name of Re	sulting Florida Limited Co	empany)
			nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please return all cor	respondence concernir	ng this matter to:	
REGINALD RICHARI			
	(Contact Person)		
M & R MULTI FINAN	CIAL SERVICES LLC (Firm/Company)		
1853 SW 103 RD AV	ENUE		
	(Address)		
MIRAMAR FL 33025			
	City, State and Zip Code)		
rcapitalfinancial@gma	ail.com		
E-mail Address: (to	be used for future annual re	port notifications)	
For further informat	ion concerning this ma	tter, please call:	
REGINALD RICHARD	SON	_at (754) 235-	0000
(Name of Cont.	act Person)	(Area Code) (Day	ytime Telephone Number)
	for the following amou a bank located in the		sed by this office must be payable in US
\$150.00 Filing Fees \$25 for Conversion \$\$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Add	ress:	Stree	t Address:
New Filing S	ection	New	Filing Section
Division of C	•		ion of Corporations
P.O. Box 632	. /	The C	Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Conversion 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.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: LOYALTY FINANCIAL SOLUTIONS INC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a INCORPORATED P12000062992
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of FLORIDA, USA
(Enter state, or if a non-U.S. entity, the name of the country)
on 07/18/2012 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
M & R MULTI FINANCIAL SERVICES LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: 03/10/2021
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 locument'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 th	is <u>10</u>	_day of <u>MARCH</u>	······	20 21		
Signatur	e of Author	ized Representati	ve of Limit	ed Liability C	Company:	
Signature Printed N	of Authoriz ame: REGINA	ed Representative:	Regine	Title: MANA	bardson GER	_
Signatur	e(s) on behal	f of Other Busines	s Entity: [S	See below for	required signature(s)]	
Signature	Regino	ald Bicho	<u>vacov</u>	١	GER	
Printed N	ame: <u>REGIN</u>	ALD RICHARDSON	···· = · - · · · ·	Title: MANA	GER	
Signature	Regino	1d Bichar	dsov	\	R	_
Printed N	ame: <u>REGINA</u>	ALD RICHARDSON		Title: OWNE	R	-
Signature	:					
Printed Na	ame:			Title:		_
Signature:						
Printed Na	ame:			Title:		_
Signature:						
Printed Na	ame:			Title:		-
Sionature:						
Printed Na	ame:			Title:		-
If Florida	Corporatio	n·				
Signature	of Chairman,	, Vice Chairman, D				
If Director	rs or Officers	have not been selec	cted, an Inco	rporator must	sign.	
		rtnership or Limit	ed Liability	Partnership:		
Signature	of one Gener	al Partner.				
		rtnership or Limit neral Partners.	ed Liability	Limited Part	nership:	
All others Signature	<u>:</u> of an authoriz	zed person.				
Fccs:					•	
Аr	ticles of Cor	nversion:		\$25.00		
		a Articles of Organ		\$125.00		
	rtified Copy			\$30.00 (Optio	•	
Ce	rtificate of S	itatus:		\$5.00 (Option	al)	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	y is:
M & R MULTI FINANCIAL SERVICES LLC (Must contain the words "Limited Li	iab:lity Company, "L.L.C.," or "L.I.C.")
ARTICLE II - Address:	ne principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
1853 SW 103RD AVENUE	1853 SW 103RD AVENUE
MIRAMAR FL 33025	MIRAMAR FL 33025
	ered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
The name and the Florida street address of t	the registered agent are:
REGINALD RICHARDSO N	ame
1853 SW 103RD AVENUI Florida street address (F.O. Box <u>NOT</u> acceptable)
MIRAMAR	FL 33025
City	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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	REGINALD RICHARDSON
	1853 SW 103RD AVENUE
	MIRAMAR FL 33025
	
	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
Regionald Bisha	rdson
•	
This document is executed in accordance v	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that the Department of State constitutes a third degree felon
REGINALD RICHARDSON	
Тур	oed or printed name of signee
	D114

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)