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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

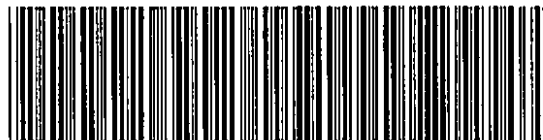
(Document Number)

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## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** INTEGRATED INVESTMENT SOLUTIONS LLC

\_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Domestication of a Non-U.S. Entity and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RAFAEL BECK

\_\_\_\_\_  
Name of Person

INTEGRATED INVESTMENT SOLUTIONS LLC

\_\_\_\_\_  
Firm/Company

7000 W PALMETTO PARK ROAD, SUITE 503

\_\_\_\_\_  
Address

BOCA RATON, FL 33433

\_\_\_\_\_  
City/State and Zip Code

RBECK@INTEGRATED.SOLUTIONS

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RAFAEL BECK

\_\_\_\_\_  
Name of Person

at ( 561 )

Area Code

283-0772

\_\_\_\_\_  
Daytime Telephone Number

**Mailing Address:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

New Filing Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Domestication: \$25  
Articles of Organization: \$125  
Total to Domesticate and file: \$150



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 26, 2021

RAFAEL BECK  
7000 W PALMETTO PARK RD STE 503  
BOCA RATON, FL 33433

SUBJECT: INTEGRATED INVESTMENT SOLUTIONS LLC  
Ref. Number: W21000141116

We have received your document for INTEGRATED INVESTMENT SOLUTIONS LLC and your check(s) totaling \$150.00. However, the document has not been filed and is being retained in this office for the following:

The incorrect form was submitted to our office.

We are enclosing the proper form(s) with instructions for your convenience.

Please return 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) 245-6052.

Jessica A Fason  
Regulatory Specialist II

Letter Number: 421A00026048

2021 OCT 26 PM 12:16  
The correct form is attached. Thank you  
for your assistance in this matter.

Rafael Beck

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** INTEGRATED INVESTMENT SOLUTIONS LLC  
(Name of Resulting Florida Limited Company)

The enclosed Articles 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. 605.1045, F.S.

Please return all correspondence concerning this matter to:

RAFAEL BECK

(Contact Person)

INTEGRATED INVESTMENT SOLUTIONS LLC

(Firm/Company)

7000 W PALMETTO PARK ROAD, SUITE 503

(Address)

BOCA RATON, FL 33433

(City, State and Zip Code)

RBECK@INTEGRATED.SOLUTIONS

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

RAFAEL BECK at (561) 283-0772  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

<input checked="" type="checkbox"/> \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	<input type="checkbox"/> \$155.00 Filing Fees and Certificate of Status	<input type="checkbox"/> \$180.00 Filing Fees and Certified Copy	<input type="checkbox"/> \$185.00 Filing Fees, Certified Copy, and Certificate of Status
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**Mailing Address:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

New Filing Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**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:  
INTEGRATED INVESTMENT SOLUTIONS LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY  
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of STATE OF NEW JERSEY  
(Enter state, or if a non-U.S. entity, the name of the country)

on JUNE 29, 2005  
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:  
INTEGRATED INVESTMENT SOLUTIONS 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.

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Signed this 1ST day of NOVEMBER 2021.

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: Rafael Beck  
Printed Name: RAFAEL BECK Title: SENIOR MANAGING DIRECTOR

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature: Rafael Beck  
Printed Name: RAFAEL BECK Title: SENIOR MANAGING DIRECTOR

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

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

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 Incorporator must sign.

**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.

**All others:**

Signature of an authorized person.

**Fees:**

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

INTEGRATED INVESTMENT SOLUTIONS LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

## ARTICLE II - Address:

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

### Principal Office Address:

7000 W PALMETTO PARK ROAD

SUITE 503

BOCA RATON, FL 33433

### Mailing Address:

7000 W PALMETTO PARK ROAD

SUITE 503

BOCA RATON, FL 33433

## 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:

RAFAEL BECK

Name

7000 W PALMETTO PARK ROAD, SUITE 503

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

BOCA RATON

City

FL 33433

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..*

Rafael Beck

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:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

RAFAEL BECK

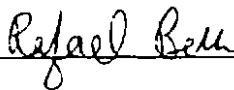
7000 W PALMETTO PARK ROAD, SUITE 503

BOCA RATON, FL 33433

(Use attachment if necessary)

**ARTICLE V: Other provisions, if any.**

**REQUIRED SIGNATURE:**



**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.

RAFAEL BECK

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)

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