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(Re	questor's Name)	
•	,	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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12905 SW 42 STREET Suite: 210 MIAMI, FL 33175 Phone: 305-444-4994

Email: filing@ecfsfiling.com

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CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

(CORPORATE NAME	LOANS CORP (DOC	UMENT #)
2. (CORPORATE NAME) (DOC	UMENT#)
3. (CORPORATE NAME) (DOC	UMENT#)
☐ Walk-In X P	ick up time: DCertified Copy	Certificate Of Status
Walk-In X P	ick up time: Description Copy Control Copy Copy Copy Copy Copy Copy Copy Copy	<u></u>
New Filings		Other Filings Annual Report
New Filings Profit	Amendments	Other Filings
New Filings Profit Non-Profit	Amendments Amendments	Other Filings Annual Report
	Amendments Amendments Resignation	Other Filings Annual Report Fictitious Name

Examiners Initials

Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

The Articles 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.605.1045, Florida 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 11th	day of September	20	
Signature of Authori	ized Representative of Li	mited Liability Company:	
Signature of Authorize Printed Name: Rosario M	ed Representative: <u>Rosa</u> Montaner	rio Montaner Title: AMBR	
Signature(s) on behal	f of Other Business Entity	: [See below for required signature(s)]	
Signature: Rosario	Montaner	Title: AMBR	
Signature: Printed Name:		Title:	
Signature:Printed Name:		Title:	
Signature:		Title:	
Printed Name:		Title:	
Signature:Printed Name:		Title:	
	<u>n:</u> . Vice Chairman, Director, e s have not been selected, an		
If Florida General Pa Signature of one Gener	rtnership or Limited Liab ral Partner.	pility Partnership:	202
If Florida Limited Par Signatures of ALL Ger		oility Limited Partnership:	3.050
All others: Signature of an authorize	zed person.		5 AH 7:49
Fees:			£49
Articles of Cor	nversion:	\$25.00	

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	S:
Loan Haus, LLC (Must contain the words "Limited Liabil	lity Company, "L.L.C.," or "LL.C.")
ARTICLE II - Address: The mailing address and street address of the particle o	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
350 Grapetree Drive	350 Grapetree Drive
Unit 406	Unit 406
Key Biscayne, FL 33149	Key Biscayne, FL 33149
The name and the Florida street address of the Rosario Montaner	
Nan	me — — — — — — — — — — — — — — — — — — —
350 Grapetree Drive, Unit 40	06
	O. Box <u>NOT</u> acceptable)
Key Biscayne	[F]_33149
City	Zip
liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate. I hereby accept the appointment as acity. I further agree to comply with the provisions of all a performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, F.S
Rosario Montas	ner

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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 AMBR	Rosario Montaner	
AMDR		_
	350 Grapetree Drive, Unit 406	_
	Key Biscayne, FL 33149	_
		_
		_
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		_
		_
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(Use attachment if necessary)		
		O:
FICLE V: Other provisions, if any.		
	<u> </u>	7.
		
	€	T)

REQUIRED SIGNATURE:

Rosario Montaner

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.

Rosario Montaner

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)