

P 17000036187

(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:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DEPARTMENT OF STATE

17 APR 14 AM 11:12

C. GOLDEN

APR 21 2017

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 600330 98373A

AUTHORIZATION :

COST LIMIT : \$ 105.00

ORDER DATE : April 13, 2017

ORDER TIME : 9:46 AM

ORDER NO. : 600330-005

CUSTOMER NO: 98373A

DOMESTIC AMENDMENT FILING

NAME: PAYALL, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER'S INITIALS: _____

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Charter Section
Division of Corporations

SUBJECT: PAYALL PAYMENT SYSTEMS, INC.

Name of Resulting Florida Profit Corporation

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

C. Christian Sautter

Contact Person

Seiler, Sautter, Zaden, Rimes & Wahlbrink

Firm/Company

2850 North Andrews Avenue

Address

Wilton Manors, Florida 33311

City, State and Zip Code

csautter@seisau.net

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

For further information concerning this matter, please call:

Chris Sautter

at (954) 568-7000

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|-----------------------------------------------|-------------------------------------------------------------------------------|---------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$105.00 Filing Fees | <input type="checkbox"/> \$113.75 Filing Fees
and Certificate of
Status | <input type="checkbox"/> \$113.75 Filing Fees
and Certified Copy | <input type="checkbox"/> \$122.50 Filing Fees,
Certified Copy, and
Certificate of Status |
|-----------------------------------------------|-------------------------------------------------------------------------------|---------------------------------------------------------------------|------------------------------------------------------------------------------------------------|

STREET ADDRESS:

New Filings Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



600330

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 17, 2017

CORPORATON SERVICE COMPANY

RESUBMIT

Please give original
submission date as file date.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 APR 14 PM 2:57

FILED

SUBJECT: PAYALL PAYMENT SYSTEMS, INC.
Ref. Number: W17000032951

We have received your document for PAYALL PAYMENT SYSTEMS, INC. and the authorization to debit your account in the amount of \$105.00. However, the document has not been filed and is being returned for the following:

The effective date must be in the Articles of Incorporation also.

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) 245-6052.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 617A00007429

RECEIVED
DEPARTMENT OF STATE
17 APR 20 PM 4:30

Certificate of Conversion
For
"Other Business Entity"
Into
Florida Profit Corporation

FILED

2017 APR 14 PM 2: 57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

PAYALL, LLC

Enter Name of Other Business Entity LI 5000175854

2. The "Other Business Entity" is a limited liability company

(Enter entity type. Example: limited liability company, limited partnership,
general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Florida

(Enter state, or if a non-U.S. entity, the name of the country)

on 10-14-2015

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:

NA

4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:

PAYALL PAYMENT SYSTEMS, INC.

Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: May 1, 2017

(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 Incorporation, if an effective date is listed therein.)

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.

Signed this 11th day of April, 2017.

Required Signature for Florida Profit Corporation:

* Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Gary Palmer
Printed Name: Gary Palmer Title: Chairman

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

* Signature: Gary Palmer
Printed Name: Gary Palmer Title: Authorized Representative

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

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.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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TALLAHASSEE, FLORIDA

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: PAYALL PAYMENT SYSTEMS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address

1455 SE 17th Street

Fort Lauderdale, FL 33316

Mailing address, if different is:

P.O. Box 39849

Fort Lauderdale, FL 33339

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 1,126,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gary Palmer, P, D

Address: 1455 SE 17th Street

Fort Lauderdale, FL 33316

Name and Title: Fazlollah Rostanian, D

Address: 1455 SE 17th Street

Fort Lauderdale, FL 33316

Name and Title: Chris Quinlan, VP, D

Address: 1455 SE 17th Street

Fort Lauderdale, FL 33316

Name and Title: Greg Van Ert, D

Address: 1455 SE 17th Street

Fort Lauderdale, FL 33316

Name and Title: Matthew Van Meter, S, T, D

Address: 1455 SE 17th Street

Fort Lauderdale, FL 33316

Name and Title: Michael Palmer, VP

Address: 1455 SE 17th Street

Fort Lauderdale, FL 33316

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: C. Christian Sautter, Esq.
Address: 2850 North Andrews Avenue
Wilton Manors, FL 33311

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: C. Christian Sautter, Esq.
Address: 2850 North Andrews Avenue
Wilton Manors, FL 33311

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: May 1, 2017 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Corporation Service Company

By: _____
Required Signature/Registered Agent

4-20-2017
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Required Signature/Incorporator

4-20-2017
Date

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TALLAHASSEE, FLORIDA