Pamo 14317

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

Office Use Only



400352094084

09/15/20--01034--026 **105.00

SEORETARY OF STATE

N CHILICAN SEP 14 770

COVER LETTER

TO:	New Filing Se Division of Co			·	•	
SUBJE	ECT:	ARIAN	FINANCI	M SERU	uces.	. /NC.
			Name of Re	esulting Florida	Profit C	orporation
						are submitted to convert the following eligibles 3 & 607.0202, F.S.
Please	return all corres	pondence c	oncerning this n	natter to:		
	RICHAD	M.	ALLISO	V		
		Conta	et Person		-	
<u> </u>	ARIAON	Firm/C	VCIAL SI	CAVICES,	lac	•
10	9 VELV	CTLLA AC	F Dav	E	-	
	T JOH	NS F	1 322	59		
	Rick (e-mail address: (mar	JANFS.CO	2 ~	• · · · · · · ·	
r.	-man address: (to be used i	or ruture annual	герогі пописа	tion)	
^	ther informatior	-	,			
1	- (CHARD	M. Au	150N a	1 904)_4(60 2700 Daytime Telephone Number
	Name of C	ontact Perso	n	Area Co	ode and E	Daytime Telephone Number
Enclos	ed is a check for	the following	ng amount:			
± \$10	5.00 Filing Fees	□\$113.7: and Certif Status		∃\$113.75 Filin and Certified Co	рру (□\$122.50 Filing Fees. Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporation 7	s		New Fil Division The Cen	Address: ling Section of Corporations of Tallahassee . Monroe Street, Suite 810

Tallahassee, Fl. 32303



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 15, 2020

RICHARD M. ALLISON 109 VELVET LEAF DRIVE ST. JOHNS, FL 32259

SUBJECT: MARIAN FINANCIAL SERVICES, INC.

Ref. Number: W20000105471

We have received your document for MARIAN FINANCIAL SERVICES, INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 020A00017551

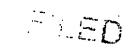
Articles of Conversion For Converting Eligible Entity Into Florida Profit Corporation

SECRETARY OF STATE TALLAHASSEE, FL

The Articles of Conversion and attached Articles of Incorporation are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607.11933 & 607.0202. Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:
MARIAN FINANCIAL SERVICES INC.
Enter Name of the Converting Entity
2. The converting entity is a
(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 Norma (Enter state, or if a non-U.S. entity, the name of the country)
on7-18-2006
on
3. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation: MARIAN FINANCIAL SEQUICES, INC.
Enter Name of Florida Profit Corporation
4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.
5. If not effective on the date of filing, enter the effective date:
(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florid
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.

Signed thisday ofAUGUST_	
Required Signature for Florida Profit Corporation:	
Signature of Director, Officer, or, if Directors or Office M. All Printed Name: Lichnes A. Alekon Title:	·
Required Signature(s) on behalf of Converting Flori	ida partnerships, limited partnerships, and limited liability
companies: [See below for required signature(s).]	
Printed Name: RICHARD M ALLISON	1 0000000
Signature:	
Printed Name:	Title:
Signature:	····
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	
If Florida General Partnership or Limited Liability Signature of one General Partner.	Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
All others: Signature of an authorized person.	
Fees: Articles of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)



ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

2020 SEP 24 PH 3: 41

	10										~ 7
ARTICLE I The name of the o	NAME		b0 - 4						\${ -1:	CRETA	Hit o
The name of the o	corporation sh	all be:	MAR	AN ("	1~4~	CIAL S	tau	ncis	VNC.	<u> </u>	TASS
ARTICLE II The principal place	PRINCIPA										
		_									
109 VEL	Principal street	et address FDA	IVE		_	Ma	iiling add	dress, if	different	1S:	
ST JOB	tus Fl	_ 32	259								
				_	_		-				
	BURDOC				-						
ARTICLE III The purpose for		_	s organized	l is:							
TO (PROULDE	Fir	WW CIA	L A	ULCE	AND	350	rvici	5 A.	j A	
	ISTERE										
,,,,,,	· 51 2000		<u> </u>	12070	- 10 1	· , , , , , , , , , , , , , , , , , , ,	•				
	146										
ARTICLE IV	SHARES										
		s:/	1000								
he number of sh	ares of stock i		_ _	TORS							
ARTICLE IV The number of sh ARTICLE V Name and Title:	ares of stock i	S AND/O	R DIREC		Name an	d Title:					
The number of share and Title:	officers	S AND/O	R DIREC	Pres.							
The number of share and Title:_Address:	OFFICERS RUCHINED	E AND/O	R DIREC LUSCA LEAF	Plass.							
The number of share and Title:_Address:	officers	E AND/O	R DIREC LUSCA LEAF	Plass.							
The number of share and Title:_ Address:	OFFICERS RUCHTED 109 VE	E AND/O	LEAF	OR.	Address:						
The number of share and Title:_Address:	OFFICERS RUCHINED 109 VE	S AND/O IN P LUCT HOS, F	R DIRECT	P. Pres. DR. 259	Address:	 d Title:					
The number of share and Title:_Address:	RECHAED 109 VE	E AND/O	R DIRECTURES	DR. DR. 259	Address: Name an	 d Title:					
The number of sharticle v Name and Title: Address: Name and Title: Address:	RICHAED 109 VE	E AND/O	LEAF	OR. 259	Address: Name an Address:	 d Title:					
The number of sharticle V Name and Title: Address: Name and Title: Address: Name and Title:	RICHAED 109 VE	S AND/O	R DIRECT	DR. 259	Address: Name an Address:	d Title: d Title:					

ARTICLE VI REGISTERED AGENT

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

Name:

Address:

109 VELLETLEAF DR.

ST JOHNS FL 32259

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

Required Signature/Registered Agent