

PL5000001393

(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)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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**CAPITOL
SERVICES**

Filing Cover Sheet

Sunbiz Prepaid Account # I20160000017

To: Florida Division of Corporations

From: Merritt Walker C/O Capitol Services, Inc.

Date: 1/9/2025

Trans#: 1524308

Entity Name: ~~FL STAR SYSTEMS SOLUTIONS INC.~~

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TALLAHASSEE, FL

Articles of Organization ()

Amendment ()

Articles of Dissolution ()

Annual Report ()

~~Conversion (✓)~~

Fictitious Name ()

Foreign Qualification ()

Limited Liability ()

Limited Partnership ()

Merger ()

Reinstatement ()

Withdrawal / Cancellation ()

Other ()

Partnership Registration ()

STATE FEES PREPAID WITH SUNBIZ ACCT #I20160000017 in the amount of: ~~\$113.75~~

PLEASE RETURN:

~~Certified Copy (✓)~~ Plain Stamped Copy ()

Good Standing () Certificate of Fact ()

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Star Systems Solutions International Inc.

Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

Jeanne Balint

Contact Person

Butzel Long

Firm/Company

150 West Jefferson, Ste 100

Address

Detroit, MI 48226

City, State and Zip Code

balint@butzel.com

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

For further information concerning this matter, please call:

Jeanne Balint

Name of Contact Person

at (313) 225-7003

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

\$105.00 Filing Fees ☐ \$113.75 Filing Fees ☐ \$113.75 Filing Fees ☐ \$122.50 Filing Fees,
and Certificate of and Certified Copy Certified Copy, and
Status Certificate of Status

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

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TALLAHASSEE, FL

Articles of Conversion
For
Converting Eligible Entity
Into
Florida Profit Corporation

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:

Star Systems Solutions Inc.

Enter Name of the Converting Entity

2. The converting entity is a Corporation
(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 Michigan
(Enter state, or if a non-U.S. entity, the name of the country)

on 07/19/2016
Enter date "Converting Entity" was first organized, formed or incorporated.

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

Star Systems Solutions International 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 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.

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Signed this 8th day of January, 2025

Required Signature for Florida Profit Corporation:

Signature of Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:

DocuSigned by
Linda Brenner
AE0130E1CC52442

Printed Name: Linda Brenner Title: President

Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies: [See below for required signature(s).]

Signature: Linda Brenner
AE0130E1CC52442

Printed Name: Linda Brenner Title: President

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:

Articles 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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CLERK OF CIRCUIT COURT
JULIA M. SCHEFF
TALLAHASSEE, FL

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

ARTICLE I NAME
The name of the corporation shall be: Star Systems Solutions International Inc.

ARTICLE II PRINCIPAL OFFICE
The principal place of business/mailing address is:

Principal street address
5000 Royal Marco Way #332
Marco Island, FL 34145

Mailing address, if different is:

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CLERK OF CIRCUIT COURT
IN AND FOR
DADE COUNTY
FLORIDA

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: 60,000

ARTICLE V OFFICERS AND/OR DIRECTORS

Name and Title: Linda Brenner P, T, S and Director
Address: 5000 Royal Marco Way #332
Marco Island, FL 34145

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Linda Brenner
Address: 5000 Royal Marco Way #332
Marco Island, FL 34145

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.

DecSigned by
Linda Brenner
REG-STATE, FLORIDA

Required Signature/Registered Agent

01/08/2025

Date

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CLERK OF COURT
STATE OF FLORIDA
CLERK OF COURT