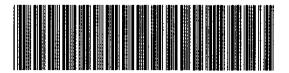
# L1400002958

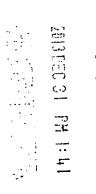
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phone	<del>:</del> #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400254568864

**400254568864** 12/31/13--01026--021 \*\*150.00



JAN - 7 2014

T Chille

## GASSMAN LAW ASSOCIATES, P.A.

ALAN S. GASSMAN\*\*
KENNETH J. CROTTY \*\*\*
CHRISTOPHER J. DENICOLO \*\*\*

1245 COURT STREET SUITE 102

CLEARWATER, FL 33756 PHONE: (727) 442-1200

FAX: (727) 443-5829

Gassmanlawassociates.com

- \* LL. M. IN TAXATION
- + BOARD CERTIFIED LAWYER IN WILLS, TRUSTS AND ESTATES
- \*\*\* ŁL.M. IN ESTATE PLANNING

December 30, 2013 VIA UPS

Florida Department of State Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

> DINESH KHANNA, M.D., P.A. Document Number P98000084990

Dear Sir/Madam:

Re:

Enclosed for filing please find a Certificate of Conversion and Articles of Organization whereby DINESH KHANNA, M.D., P.A., a Florida professional association, will convert into DINESH KHANNA, M.D., L.L.C., a Florida limited liability company, effective December 31, 2013.

Also enclosed please find a check made payable to Department of State in the amount of \$150.00 for filing fees.

Please return the filed document to our office in the enclosed self-addressed, stamped envelope.

Please contact Julie Speakman of my office if you have any questions on the above.

Best personal regards, Alan S. Gassman Unsigned in Mr. Gassman's Absence To Prevent Delay

Alan S. Gassman

ASG:jas Enclosures SASE

cc: Dinesh and Seema Khanna (w/enclosures - via email <u>seemakhanna04@gmail.com</u>)
Claudette Bergman, CPA (w/enclosures - via email <u>cbergman1@bellsouth.net</u>)

Florida Department of State December 30, 2013 Page 2

5

TREASURY DEPARTMENT NOTICE: TO THE EXTENT THAT THIS MESSAGE OR ANY ATTACHMENT CONCERNS TAX MATTERS, IT IS NOT INTENDED TO BE USED AND CANNOT BE USED BY A TAXPAYER FOR THE PURPOSE OF AVOIDING PENALTIES THAT MAY BE IMPOSED BY LAW.

J:\K\Khanna, Dinesh and Seema\DINESH KHANNA, M.D., P.A\Conversion into LLC\FL Sec. of State.1.wpd 8277

#### **Certificate of Conversion**

For

#### "Other Business Entity"

Into

#### Florida Limited Liability Company

This Certificate 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.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certific Conversion is:  DINESH KHANNA, M.D., P.A.  (Fig. 1) Project Project Factors  (Fig. 1) Project Factors  (Fig. 2) Project Factors  (Fig.	cate of
(Enter Name of Other Business Entity)	er 5~3
2. The "Other Business Entity" is a CORPORATION	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	
first organized, formed or incorporated under the laws of FLORIDA	_ T\$
(Enter state, or if a non-U.S. entity, the name of the country)	
on 10/5/1998	مسيد المحمد المحمد
(Enter date "Other Business Entity" was first organized, formed or incorpo	orated)
which it is now organized, formed or incorporated:  4. The name of the Florida Limited Liability Company as set forth in the attached Articl Organization:	les of
DINESH KHANNA, M.D., L.L.C.	
(Enter Name of Florida Limited Liability Company)	
5. If not effective on the date of filing, enter the effective date: 12-31-13. (The effective date: 1) cannot be prior to nor more than 90 days after the date this d filed by the Florida Department of State; AND 2) must be the same as the effective d attached Articles of Organization, if an effective date is listed therein.)	
6. The conversion is permitted by the applicable law(s) governing the other business entit conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting	

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

Signed this 33 day of Oll Mb	<u>l</u> 20 <u>13</u> .	
Signature of Member or Authorized Rep Individual signing affirms that the facts st constitutes a third degree felony as provid-	1( ) \	mation
Signature of Member or Authorized Repres Printed Name: <u>DINESH KHANNA</u>	Sentative: Title: MANAGER	
this document are true. Any false informat s.817.155, F.S. [See below for required sign		facts stated in ed for in
Printed Name: DINESH KHANNA	Title: PRESIDENT	
Signature:	Title:	
Printed Name:	Title:	
Signature:		
Printed Name:	Title:	
Printed Name:	Title:	
Timed Name.	1 Ittle:	<u> </u>
Signature:		
Printed Name:	Title:	•
Signature		
Printed Name:	Title:	
If Florida Corporation:	055	
Signature of Chairman, Vice Chairman, Direct If Directors or Officers have not been selected		
The state of the s	a, an inverposator must argu.	
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:	
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) Page 2 of 2	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
DINESH KHANNA, M.D. L.L.C. (Must end with the words "Limited Liability Company, the abbrevi	ation "L.L.C.," or the designation "LLC.")
ARTICLE II - Address: The mailing address and street address of the prince	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2120 SW 55th Street Road  Ocala, FL 34471	2120 SW 55th Street Road Ocala, FL 34471
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	
The name and the Florida street address of the regi	istered agent are:
ALAN S. GASSMAN	Name 5
1245 COURT STREE Florida street address (P	T, SUITE 102 O. Box NOT acceptable)
CLEARWATER City, St	FL 33756 ate, and Zip
~ · · · · · · · · · · · · · · · · · · ·	I am familiar with and accept the obligations of my

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

#### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR	DINESH KHANNA 2120 SW 55th Street Road Ocala, FL 34471	
(Use attachment if necessary)		
CLE V: Effective date, if other tha	an the date of filing: 13-31-13 (OPTIONAL)	

**REQUIRED SIGNATURE:** 

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

ALAN S. GASSMAN, AUTHORIZED REPRESENTATIVE
Typed or printed name of signee

Page 2 of 2