Laa0003a5960

(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:
, ,
Received 07/07/27





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05/24/22--01006--024 **128.75

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S. CHATHAM
JUL 25 202

22 JUL -7 FH 1: 50





FLORIDA DEPARTMENT OF STATE Division of Corporations

2022 JUL -7 PM 12: 33

June 17, 2022

CYNTHIA A TYLER 2372 BROAD RANCH DRIVE PORT CHARLOTTE, FL 33948 US

SUBJECT: CAT MEDICAL BILLING LLC

Ref. Number: W22000082512

We have received your document for and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Only non-United States entities may become a domesticated limited liability company as stated in section 605.1052, Florida Statutes. Attached isa conversion form for U.S. entities and there is a fee due of \$21.25 for the base filing fee. If you would like a certified copy, it would be \$30.00 and a certificate of status is \$5.00.

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham Regulatory Specialist II New Filing Section

Letter Number: 422A00013598

22 JUL -7 PH 1:59

COVER LETTER

(Name of Resulting Florida Limited Company)

TO: New Filing Section

Division of Corporations

SUBJECT: CAT MEDICAL BILLING LLC

		_	on, and fees are submitted to c in accordance with s. 605.10	
Please return all corr	espondence concerning	this matter to:		
Cindy Tyler				
	(Contact Person)		-	
CAT Medical Billing L	LC			
	(Firm/Company)		-	
2372 Broad Ranch Dr				
	(Address)		-	
Port Charlotte FL 339	348			
(City. State and Zip Code)		-	
catyler22@outlook.co	m			
E-mail Address: (to	be used for future annual rep	oort notifications)	-	
For further informat	ion concerning this mat	ter, please call:		
Cindy Tyler		_at (_ ²³¹	519-1468	
(Name of Cont	act Person)	(Area Code)	(Daytime Telephone Number)	
Enclosed is a check dollars and drawn or	for the following amou a bank located in the U	nt: (All checks p United States)	processed by this office must be	
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	■\$155.00 Filing Fees and Certificate of Status 3 155 CO - \$128	\Box \$180.00 Filing and Certified Cop. $75 = 420$	oy Certified Copy, and	-7 PH 1:
Mailing Add New Filing S Division of C P.O. Box 63: Tallahassee.	Iress:52.4 Crede+ 12.5 Section Par は Corporations Le 4.6 27	5.75 17120a2 14	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303	810 50

* Please see the attached letter from

· Florida Department of State Haled 6/17/2022

Letter Number 422 A Ø Ø Ø 13598 Thank you.

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: CAT Medical Billing LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S, entity, the name of the country)
4/18/2016 on
on 4/18/2016 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
CAT Medical Billing LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
the date this document is filed by the Florida Department of State.)
<u>Note:</u> 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.
5. The plan of conversion has been approved in accordance with all applicable 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 5th day of July. 2022 20	.
Signature of Authorized Representative of Limited Liabilit	v Company:
Signature of Authorized Representative: Title:	
Signature(s) on behalf of Other Business Entity: See below f	or required signature(s)]
Signature: Cynthia Tyler Title: MG	DM
Signature: Title:	
Signature: Title:	
Signature: Title:	
Signature: Printed Name: Title:	
Signature:	
Signature: Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator management of the corporator of the corporation of the corpor	ust sign.
If Florida General Partnership or Limited Liability Partners. Signature of one General Partner.	nip:
If Florida Limited Partnership or Limited Liability Limited I Signatures of ALL General Partners.	Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: \$25.00 Fees for Florida Articles of Organization: \$125.00 Certified Copy: \$30.00 (C) Certificate of Status: \$5.00 (Op)	•

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

·	ing LLC	
	(Must contain the words "Limited Lial	lity Company, "L.L.C.," or "ELC.")
ARTICLE II -	Address:	
		principal office of the Limited Liability Compar
Principal Offic	ee Address:	Mailing Address:
2372 Broad Ran	ch Drive	
Port Charlotte Fl	_ 33840	
		ed Office, & Registered Agent's Signature:
ARTICLE III The Limited Liability business entity with	- Registered Agent, Registe	gistered Agent. You must designate an individual or another
The Limited Liability business entity with	- Registered Agent, Registery Company cannot serve as its own Renan active Florida registration.) he Florida street address of the Cynthia Tyler	gistered Agent. You must designate an individual or another
ARTICLE III The Limited Liability business entity with	- Registered Agent, Registery Company cannot serve as its own Renance active Florida registration.) he Florida street address of the Cynthia Tyler Na 2372 Broad Ranch Drive	gistered Agent. You must designate an individual or another registered agent are:
ARTICLE III The Limited Liability business entity with	- Registered Agent, Registery Company cannot serve as its own Renance active Florida registration.) he Florida street address of the Cynthia Tyler Na 2372 Broad Ranch Drive	e registered agent are:

edfall accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGRM	Cynthia Tyler
	2372 Broad Ranch Dr
	Port Charlotte FL 33948
	
(Use attachment if necessary)	
(Ose attachment if necessary)	
CLE V: Other provisions, if any.	
CEE V. Outer provisions, it may.	
·	
 -	
	
DECHIDED SICNATURE.	
REQUIRED SIGNATURE:	1 a
Centhal	- Yeald ro
- Carocos	
Signature of a member or a This document is executed in accordance	an authorized representative of a member

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.

Cynthia Tyler 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)