53471

(Requestor's Name)
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PICK-UP WAIT MAIL
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2024 AUG 29 FM 3: 51

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T0:	Registration Section		
	Division of Corporations		

SUBJECT: US Assu	re, Inc.		
	Name of Lir	nited Liability Company	
	• .		
The enclosed Articles of	f Amendment and fee(s) are sui	bmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	·
•			
	Avenir V. Morozov		
		Name of Person	
	Milam Howard Nican	dri & Gillam, P.A.	
		Firm/Company	
	14 East Bay Street		
	4	Address	•
	Jacksonville, Florida	. 32202	
		City/State and Zip Code	77 SEC
	ktravis@milamhoward		AL AU
For further information c	n-mail address: (oncerning this matter, please c	to be used for future annual report notification) all:	2024 AUG 29 SECRETARY TALLAHAS
Kathleen Travis			PM 3: 51 OF STAT SSEE, FL
Name o	f Person	at (904) 357-3660 Area Code Daytime Telephone Number	3: 5 STA
			· 🛱 🚊
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) - Certified (of Status &

Mailing Address:
Registration Section

Division of Corporations P.O. Box 6327 Tallahassec, FL 32314 Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Conversion For Florida Profit Corporation Into a Non-Florida Business Entity

The Articles of Conversion are submitted to convert the following Florida Profit Corporation into an a business entity formed under the laws of another jurisdiction in accordance with s. 607.11933. Florida Statutes.

Statutes.		
1. The name of the Florida Profit C US ASSURE, INC.	orporation converting into the	(converted) resulting business entity is:
Enter Name o	of Florida Profit Corporation	
2. The name of the resulting busine US ASSURE, LLC	ss entity is:	
Enter Nan	ie of (Converted) Resulting I	Business Entity
3. The (converted) resulting entity	limited liability company	.0. 1
(Enter entity type. Example: lin	nited liability company, limit ommon law or business trust	ed partnership, general partnership, (ctc.)
oronnizad formad or incorporated t	noder the laws of Delaware	LAITA
organized, formed or incorporated to (Enter state, o	or if a non-U.S. entity, the na	me of the country)
4. The above referenced Florida Procompliance with Chapter 607, F.S.	ofit Corporation has converted	into another business entity in The STA
5. The plan of conversion was appr Chapter 607, F.S.	oved by the converting Florida	a Profit Corporation in accordance with
2. When the articles of conver	by the organic law of the (corsion take effect.	everted) resulting entity; or
Signed this 28th Signed by.	day of August Lan Firguson	20_ ²⁴
Michael A	lan Firguson	
Signature: 600082A4C7AA4	89	
(Must be signed by a Director, Of Incorporator.)	ficer, or, if Directors or Offi	cers have not been selected, an
Printed Name: M. Alan Ferguson	President Title:	
Fees: Filing Fee:	\$35.00	
Certified Copy: Certificate of Status:	\$8.75 (Optional)	
Centificate of Status:	\$8.75 (Optional)	

STATE OF DELAWARE CERTIFICATE OF FORMATION OF LIMITED LIABILITY COMPANY

The undersigned authorized person, desiring to form a limited liability company pursuant to the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited liabili	ity company is US ASSURE, LLC	
2. The Registered Office of the li located at 1209 Orange Street	imited liability company in the State of De	laware is (street).
in the City of Wilmington	. Zip Code 19801	The
name of the Registered Agent at such	address upon whom process against this li	mited
liability company may be served is The Jacksonville. Florida 32256	By: Signed by: By: 800082A4C7AA4B9 Authorized Person	H vi vi
	Name: M. Alan Ferguson Print or Type	TATE