

A06000001037

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

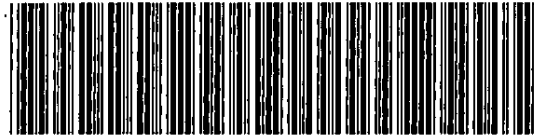
(Document Number)

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08/01/06--01006--004 **1052.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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GASSMAN, BATES & ASSOCIATES, P.A.
ATTORNEYS AT LAW

ALAN S. GASSMAN **
LONDON L. BATES **
LOUIS A. "DREW" LAGRANDE ***

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

1245 COURT STREET
SUITE 102
CLEARWATER, FL 33756
PHONE: (727) 442-1200
FAX: (727) 443-5829
GassmanPA.com

July 28, 2006

VIA DHL

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

Re: MEDICAL CONSTRUCTION, L.L.P.

Dear Sirs/Madams:

Attached for filing please find a Certificate of Conversion, whereby MEDICAL CONSTRUCTION, L.L.P. will convert into SMITHA SEAN LIMITED PARTNERSHIP, L.L.L.P.

The Certificate of Limited Partnership of SMITHA SEAN LIMITED PARTNERSHIP, L.L.L.P. (a Florida limited liability limited partnership) is also attached, as well as a check in the amount of \$1052.52 for filing fees.

Please provide our office with confirmation of filing.

If you have any questions on the attached, please contact Tina Arvin of my office at 727-442-1200 x. 241.

Best personal regards,


Alan S. Gassman

ASG:*rjs

Enclosures

cc: Ashok and Rajeswari Sonni (w/ encl.)
Prakash Seetharamiah (w/ encl.)

J:\S\Sonni, Ashok\SMITHA SEAN LIMITED PARTNERSHIP, L.L.L.P\Sec. of State.1a.wpd
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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 3, 2006

GASSMAN, BATES & ASSOCIATES, P.A.
ATTN: ALAN S. GASSMAN
1245 COURT STREET, SUITE 102
CLEARWATER, FL 33756

SUBJECT: SMITHA SEAN LIMITED PARTNERSHIP, L.L.L.P.
Ref. Number: W06000034225

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TALLAHASSEE, FLORIDA

We have received your document for SMITHA SEAN LIMITED PARTNERSHIP L.L.L.P. and your check(s) totaling \$1052.52. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability limited partnership cannot include a limited partnership suffix. The name must include an acceptable limited liability limited partnership suffix. Acceptable limited liability limited partnership suffixes include: Limited Liability Limited Partnership, L.L.L.P. or LLLP. Please amend your document accordingly.

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) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 806A00048635

GASSMAN, BATES & ASSOCIATES, P.A.
ATTORNEYS AT LAW

ALAN S. GASSMAN **
LONDON L. BATES **
LOUIS A. "DREW" LAGRANDE ***

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1245 COURT STREET
SUITE 102
CLEARWATER, FL 33756
PHONE: (727) 442-1200
FAX: (727) 443-5829
GassmanPA.com

August 14, 2006

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: **SMITHA SEAN LIMITED PARTNERSHIP, L.L.L.P.**
REFERENCE NUMBER W06000034225

Dear Sir/Madam:

Pursuant to the attached correspondence of August 3, 2006, we have made the requested corrections and are submitting the attached Certificate of Conversion and Certificate of Limited Liability Limited Partnership for filing.

Please contact Tina Arvin of my office if you have any questions on the attached.

Best personal regards,


Alan S. Gassman

ASG:try
Enclosures

cc: Ashok and Rajeswari Sonni (w/encls.)
Prakash Seetharamiah (w/encls.)
Barry Teeters (w/encls.)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Certificate of Conversion
For
"Other Business Organization"
Into
Florida Limited Partnership or Limited Liability Limited Partnership

This Certificate of Conversion **and attached Certificate of Limited Partnership** are submitted to convert the following **"Other Business Entity"** into a **Florida Limited Partnership or Limited Liability Limited Partnership** in accordance with s.620.2104, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

MEDICAL CONSTRUCTION, L.L.P.

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a **limited liability partnership**
(Enter entity type. Example: corporation, limited liability company, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of **Florida**
(Enter state, or if a non-U.S. entity, the name of the country)

on **5-31-06**
(Enter date "Other Business Entity" was first organized, formed or incorporated)

3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership as set forth in the **attached Certificate of Limited Partnership**:

SMITHA SEAN, L.L.L.P.

(Enter Name of Florida Limited Partnership or Limited Liability Limited Partnership)

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SECRETARY OF STATE

4. The conversion was approved as required by Chapter 620, F.S., and was approved in such a manner that complied with the converting organization's governing law.

5. If not effective on the date of filing, enter the effective date: _____
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Limited Partnership, if an effective date is listed therein.)

Signed this 24th day of APRIL, 2006.

Signature of Each General Partner Listed in Attached Certificate of Limited Partnership:

Ashok Sonni

ASHOK SONNI

Rajeswari Sonni

RAJESWARI SONNI, as Trustee

Rajeswari Sonni Revocable Trust
dated 4-11-01, as Amended Oct. 14, 2005

Fees:

Certificate of Conversion:	\$ 52.50
Fees for Florida Certificate of Limited Partnership:	\$1,000.00
(\$965 Filing Fee and \$35 Filing Fee)	
Certified Copy:	\$ 52.50 (Optional)
Certificate of Status:	\$ 8.75 (Optional)

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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. SMITHA SEAN, L.L.L.P.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
*Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.*

2. 6325 U.S. Highway 27 North, Suite 201, Sebring, FL 33870

(Street address of initial designated office)

3. Alan S. Gassman, Esq.

(Name of Registered Agent for Service of Process)

4. 1245 Court Street, Suite 102, Clearwater, FL 33756

(Florida street address for Registered Agent)

5. *I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*



Signature of Registered Agent

6. 6325 U.S. Highway 27 North, Suite 201, Sebring, FL 33870

(Mailing address of initial designated office)

7. If limited partnership elects to be a limited liability limited partnership, check box ☒.

8. Name and business address of each general partner:

Name:

Business Address:

RAJESWARI SONNI, as Trustee of the Rajeswari Sonni Rev Trust dated 4/11/01

6325 U.S. Highway 27 North, Suite 201

Sebring, FL 33870

ASHOK SONNI

6325 U.S. Highway 27 North, Suite 201

Sebring, FL 33870

9. Effective date, if other than the date of filing:

(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Signed this 26th day of APRIL, 2006

Signature of each general partner:

Ashok Sonni
Rajeswari Sonni

ASHOK SONNI

RAJESWARI SONNI, as Trustee

Rajeswari Sonni Revocable Trust
dated 4-11-01, as Amended Oct. 14, 2005

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$ 52.50

Certificate of Status (optional):

\$ 8.75