# L07000056859

· (Requestor's Name)		
(Address)		
•	•	
(Address)		
(Address)		
	(6) . 61	10
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
L FICK-OF	L **^!!	LI WALL
(Business Entity Name)		
·	•	,
•		
	cument Number)	
(DC)	cument (vumber)	
<b>-</b>	<b>.</b>	
Certified Copies Certificates of Status		
Cupaint Instructions to I	Filing Officer	
Special Instructions to Filing Officer:		
		18
	,	
		1000
<u> </u>	20	1000
'		
\	1	7

Office Use Only



300093725143

03/23/07--01020--019 \*\*150.00

SECRETARY OF STATE

# LAW OFFICES McCLELLAND, JONES LYONS & LACEY, L.C.

CLIFTON A. MCCLELLAND, JR. HARRY A. JONES AARON D. LYONS STEPHEN J. LACEY

ONE HARBOR PLACE
1901 SOUTH HARBOR CITY BLVD.
SUITE 500
MELBOURNE, FLORIDA 32901-4770

TEL (321) 984-2700 FAX (321)723-4092 <u>HJONES@MJLANDL.COM</u> Private Line: (321) 984-9859

March 21, 2007

Secretary of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32301

Re: 850 Century Medical Drive, LLC

Dear Sir/Madam:

Enclosed find an original and one copy of Certificate of Conversion with the attached Articles of Incorporation for the above-captioned corporation, together with check in the sum of \$150.00 to cover your filing fees.

Please stamp the copy of the Articles with the date received in your office and return to the undersigned.

Thank you for your assistance in this matter.

Sincerely,

Carol F. Smith. Paralegal Asst to

Harry A. Jones, Esquire

cfs

Enclosure: As Noted



March 27, 2007

CAROL F. SMITH ONE HARBOR PLACE 1901 S. HARBOR CITY BLVD., STE. 500 MAITLAND, FL 32901-4770

SUBJECT: 850 CENTURY MEDICAL DRIVE, L.L.C.

Ref. Number: W07000014999

We have received your document for 850 CENTURY MEDICAL DRIVE, L.L.C. and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certifcate of Conversion indicates you are converting a Florida general partnership into a Florida LLC. There is no general partnership registered with this office by the name of 850 CENTURY MEDICAL DRIVE, L.L.C.. A general partnership may not use the suffix LLC and a general partnership registration statement must be on file in this office before a Florida general partnership can convert into another business entity. I am enclosing a blank general partnership registration form and the fee to file that application (which must be filed first or at the same time as the conversion and articles of organization) is \$50.00.

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) 245-6967.

Letter Number: 107A00020771

Leslie Sellers Document Specialist

# LAW OFFICES McCLELLAND, JONES LYONS & LACEY, L.C.

CLIFTON A. MCCLELLAND, JR. HARRY A. JONES AARON D. LYONS STEPHEN J. LACEY

ONE HARBOR PLACE
1901 SOUTH HARBOR CITY BLVD.
SUITE 500
MELBOURNE, FLORIDA 32901-4770

TEL (321) 984-2700 FAX (321)723-4092 <u>HJONES@MJLANDL,COM</u> Private Line: (321) 984-9859

May 24, 2007

Via FedEx: 7902 5529 1124

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

Re:

Subject:

850 Century Medical Drive, LLC

Reference No.:

W07000014999

Letter Number:

107A00020771

Dear Ms. Sellers:

I am in receipt of your letter dated March 27, 2007, with regards to the above captioned matter. We have corrected Page 1, first article to reflect the correct name of the unincorporated business.

I have once again enclosed the original and one (1) copy along with a self addressed stamped envelope for the return of a stamped copy to our office.

In the event you have any questions please do not hesitate to give me call.

Sincerely,

Carol F. Smith, Paralegal to

Harry A. Jones, Esquire

Enclosures: As Noted

#### **CERTIFICATE OF CONVERSION**

Pursuant to Section 608.439, Florida Statues, the following unincorporated business entity formerly doing business as General Partnership hereby submits the attached Articles of Organization and this Certificate of Conversion to convert to a Florida Liability Company:

First: The name of the unincorporated business immediately prior to filing this document was:

## LEVINE & ZIMM

Second: The date on which and the jurisdiction in which the unincorporated business was first created or otherwise came into being are:

- A. Date: June 30, 1993
- B. Jurisdiction: Florida
- C. If different from the above-noted jurisdiction, the jurisdiction immediately prior to its conversion: N/A

Third: The name of the Limited Liability Company as set forth in the attached Articles of Organization is:

#### 850 CENTURY MEDICAL DRIVE, L.L.C.

IN WITNESS WHEREOF, the undersigned members do make and file this Certificate of Conversion and attached Articles of Organization, hereby declaring and certifying that the facts herein stated are true and hereunto set their hand and seal this 20 day of ,2007.

RICHARDIM. LEVINE, M.D.,

LYNN B. LEVINE

SOLÓMON ZIMM, M.D.

SEE, FLO

I 3: 15 STATE

# STATE OF FLORIDA COUNTY OF BREVARD

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, RICHARD M. LEVINE, M.D., appeared, and he acknowledged executing the foregoing instrument freely and voluntarily under authority duly vested in him. Said person [X] is personally known to me or [ ] presented drivers license as identification.

WITNESS my hand and official seal in the County and State last aforesaid this 20 day of MARCH, 2007.

My Commission Expires

TINA M. NORMAN

# STATE OF FLORIDA COUNTY OF BREVARD

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, LYNN B. LEVINE appeared, and she acknowledged executing the foregoing instrument freely and voluntarily under authority duly vested in her. Said person [ ] is personally known to me or [ ] presented drivers license as identification.

WITNESS my hand and official seal in the County and State last aforesaid this 20 day of 2007.

My Commission Expires: 2/14/2010

TINA M. NORMAN Notary Public - State of Florida Bonded By National Notary Asan.

# STATE OF FLORIDA COUNTY OF BREVARD

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, SOLOMON ZIMM, M.D., appeared, and he acknowledged executing the foregoing instrument freely and voluntarily under authority duly vested in him. Said person [X] is personally known to me or [\_\_] presented drivers license as identification.

WITNESS my hand and official seal in the County and State last aforesaid this 20 day of \_\_\_\_\_\_\_, 2007.

Notary Public My Commission 2/14/2010



# STATE OF FLORIDA COUNTY OF BREVARD

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, NINA S. ZIMM appeared, and she acknowledged executing the foregoing instrument freely and voluntarily under authority duly vested in her. Said person [vis personally known to me or [vis personally known to me or vested drivers license as identification.

WIFNESS my hand and official seal in the County and State last aforesaid this

, 2004.

TANYA G HAMILTON Notary Public - State of Florida y Commission Expires Feb 16, 2010 Commission # DD 519696 **Bonded By National Notary Assn** 

Notary Public

My Commission Expires

#### ARTICLES OF ORGANIZATION

OF

#### 850 CENTURY MEDICAL DRIVE, LLC

The undersigned persons hereby adopt these Articles of Organization in order to form a limited liability company under Chapter 608 of the Florida Statutes.

#### <u>ARTICLE I – NAME</u>

The name of the limited liability company shall be:

850 CENTURY MEDICAL DRIVE, LLC (the "Company").

#### **ARTICLE II – DURATION**

The Company shall commence upon the execution of these Articles and shall exist perpetually.

### **ARTICLE III – PURPOSE**

The purpose of the Company is to engage in any and all lawful business activity that is not prohibited with respect to a limited liability company organized according to the laws of the State of Florida.

# **ARTICLE IV – ADDRESS**

The initial street and mailing address of the principal place of business of the Company is 850 Century Medical Drive, Titusville, FL 32796.

#### ARTICLE V – REGISTERED AGENT

The address in Florida of the initial registered office of the Company is 850 Century Medical Drive, Titusville, FL 32796, and the name of the initial registered agent of the Company at that address is RICHARD M. LEVINE.

#### ARTICLE VI – MANAGEMENT

The Company shall be managed by one (1) or more managers. The names and addresses of the initial manager of the Company is as follows:

RICHARD M. LEVINE, M.D. 850 Century Medical Drive Titusville, FL 32796

# <u>ARTICLE VII – ADOPTION OF OPERATING AGREEMENT</u>

The Members of the Company shall adopt an Operating Agreement which shall contain the provisions for the management of the business and the regulation of the affairs of the Company that are not inconsistent with the Articles or the laws of the State of Florida.

#### ARTICLE VIII – AMENDMENT

The Company shall have the power to amend or supplement these Articles of Organization when approved by unanimous vote of the Members.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 20 day of 1000, 2007.

RICHARD M. LEVINE, M.D., Initial Manager, Initial Member and Tenants by the Entireties with Lynn B. Levine, his wife

LYNN B. LEVINE, Initial Member and Tenants by the Entireties with Richard M. Levine, M.D., her husband

SOLOMON ZIMM, M.D., Initial Member and Tenants by the Entireties with Nina S. Zimm, his wife

NDAS. ZIMM, Initial Member and Fenants by the Entireties with Solomon Zimm, M.D., her husband

#### ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above stated limited liability Company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

RICHARD M. LEVINE, M.D

2007 MAY 29 PM 3: 15