

L09000064210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

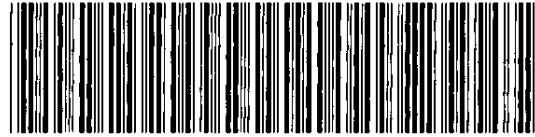
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Special Instructions to Filing Officer:

W09-30572

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07/02/09--01001--004 **150.00

RECEIVED
09 JUL - 1 PM 3:16
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
09 JUL - 1 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

JUL 2 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 1, 2009

CT CORP

SUBJECT: ROBERT C. NUCCI, M.D., LLC
Ref. Number: W09000030572

FILED
09 JUL - 1 PM 3:55
TALLAHASSEE, FLORIDA

We have received your document for ROBERT C. NUCCI, M.D., LLC 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 effective date of the conversion cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date listed in the Florida Articles of Organization, if any.

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.

Leslie Sellers
Regulatory Specialist II

Letter Number: 309A00022686



CT

a Wolters Kluwer business

CT
1203 Governors Square Blvd.
Tallahassee, FL 32301-2960

850 222 1092 tel
850 222 7615 fax
www.ctlegalsolutions.com

July 2, 2009

Department of State, Florida
Clifton Building
2611 Executive Center Circle
Tallahassee FL 32301

RE-SUBMIT
Please retain original filing
date of submission 7/1/09

Re: Order #: 7602186 SO
Customer Reference 1: 9137/19648
Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Robert C. Nucci, M.D., Inc. (FL)
Conversion
Florida

Robert C. Nucci, M.D., LLC (FL)
Formation
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Christina McNeair
CL Operations Specialist
Christina.McNeair@wolterskluwer.com

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2009 JUL -2 PM 3:21
NOT RETURNED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

**CERTIFICATE OF CONVERSION
FOR
"OTHER BUSINESS ENTITY"
INTO
FLORIDA LIMITED LIABILITY COMPANY**

FILED
09 JUL -1 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This Certificate of Conversion and attached Articles of Organization 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 Certificate of Conversion is: **Robert C. Nucci, M.D., Inc.**
2. The "Other Business Entity" is a corporation first organized, formed or incorporated under the laws of Florida on May 22, 1995, and assigned Document Number P95000041501.
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Robert C. Nucci, M.D., LLC


4. The effective date of this conversion will be July 1st 2009.

Signed this 1st day of July, 2009.

ROBERT C. NUCCI, M.D., LLC

By: 
Robert C. Nucci, Manager

ROBERT C. NUCCI, M.D., INC.

By: 
Robert C. Nucci, M.D., President

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - NAME

The name of the Limited Liability Company is: **Robert C. Nucci, M.D., LLC**

ARTICLE II - ADDRESS


The mailing address and street address of the principal office of the Limited Liability Company is: 6322 Gunn Highway, Tampa, FL 33625.

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE,
& REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

Robert C. Nucci
6322 Gunn Highway
Tampa, FL 33625

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 as provided for in Chapter 608, F.S.


Robert C. Nucci, Registered Agent

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company.

ARTICLE V - MANAGER(S) OR MANAGING MEMBER(S)

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

Title:

Name and Address:


Manager

Robert C. Nucci
6322 Gunn Highway
Tampa, FL 33625

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TALLAHASSEE, FLORIDA

ARTICLE VI - EFFECTIVE DATE

The effective date of this Limited Liability Company is **July 1, 2009**.


Robert C. Nucci, Manager

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.

Robert C. Nucci
Typed or printed name of signee