L10000012615

(Req	uestor's Name)	
(Add	ress)	
/A.J.	ress)	
(Add	1622)	
(City,	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(D) (=		
(Bus	iness Entity Nar	пеј
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
=	_ . .	
Special Instructions to F	iling Officer:	
II		

Office Use Only



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FILED

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SECRETARY OF STATE
FALLAHASSEE FINALE

J. BRYAN
FFR - 3 2009
EXAMINER

COVER LETTER

TO: Registration S			
Division of C	orporations		
SUBJECT: Southern		······································	
	(Name of Resulting	Florida Limited Company	y)
	isiness Entity" into a "	_	i, and fees are submitted to ility Company" in
Please return all corre	espondence concerning	g this matter to:	
Mark S. Beans			
	(Contact Person)		3. -
Southern Horizons, Inc.			LLC SEC
	(Firm/Company)		AR C
2750 S.W. County Road	307A		ASS
	(Address)	<u></u>	MO MY
Trenton, FL 32693			FLO
(0	City, State and Zip Code)		語
Mark@MedicalSoftware	Tools.com		**
E-mail Address: (to b	e used for future annual re	port notifications)	
For further information	on concerning this ma	tter, please call:	
Mark S. Beans		at (813) 624	-9005
(Name of Conta	ct Person)		Daytime Telephone Number)
Enclosed is a check f	or the following amou	int:	
☑ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
STREET ADDRESS	S:	MAILING	ADDRESS:
Registration Section		Registration	
Division of Corporat	ions		Corporations
Clifton Building		P. O. Box 6	327

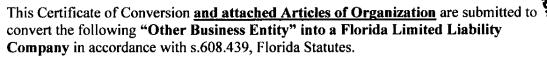
Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Certificate of Conversion For "Other Business Entity" Into

Florida Limited Liability Company



1. The name of the "Other Business Entity" in	mmediately prior to the filing of this
Certificate of Conversion is: Southern Horizons, Inc.	#P08000012813
(Enter Name of Ot	ner Business Entity)
2. The "Other Business Entity" is a Corporation	n
	orporation, limited partnership,
general partnership, commo	n law or business trust, etc.)
first organized, formed or incorporated under	the laws of Florida
(Enter state, or if a non-U.S. e	ntity, the name of the country)
on 02/01/2008	
	first organized, formed or incorporated)
3. If the jurisdiction of the "Other Business E under the laws of which it is now organized, f	
N/A	
4. The name of the Florida Limited Liability Articles of Organization:	Company as set forth in the attached
Southern Horizons, LLC	
(Enter Name of Florida L	imited Liability Company)
5. If not effective on the date of filing, enter t	he effective date:
(The effective date: 1) cannot be prior to n	
document is filed by the Florida Departmen	
effective date listed in the attached Articles	of Organization, if an effective date is
listed therein.)	

Signed this First day of February	2010
Signature of Member or Authorized Representa	tive of Limited Liability Company:
Signature of Member or Authorized Representative Printed Name: Mark S. Beans	Title: Managing Member
Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]
Signature: Mark S. B.	
Printed Name: Mark S. Beans	Title: President
Signature: Mark S. Beans Signature: Cuptle L. Buns	
Printed Name: Crystal L. Beans	Title: Vice-President
Signature:	TV41
Printed Name:	_ I itle:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	
Printed Name:	_ Title:
Ciamatuma	
Signature:Printed Name:	Title:
Timed Name.	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or C	
If Directors or Officers have not been selected, an Inc	• • • • • • • • • • • • • • • • • • • •
ICDI	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y rarmersnip: 美元 G T
Signature of one General Lattier.	SS
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others:	F STATE
Signature of an authorized person.	∑m N
Fees:	
	*** ***
Certificate of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00 \$30.00 (Ontional)
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)
Certificate of Status.	φυίου (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Southern Horizons,			_
(Must end with the word "LLC.")	s "Limited Liability Com	pany," the abbreviation "L.L.C.," or the designation	
ARTICLE II - Ad			
The mailing addres Liability Company		ss of the principal office of the Limited	
Principal Office A	Address:	Mailing Address:	
2750 S.W. County Ro	ad 307A	2750 S.W. County Road 307A	
Trenton, Florida 3269:	· · · · · · · · · · · · · · · · · · ·	Trenton, Florida 32693	_
		Registered Office, & Registered Agent's	- - s
Signature: (The Limited Liability Cindividual or another	egistered Agent, l	Registered Office, & Registered Agent's	- - s
Signature: (The Limited Liability C individual or another business entity with an	egistered Agent, looppany cannot serve as active Florida registration	Registered Office, & Registered Agent's	10 FEB
Signature: (The Limited Liability C individual or another business entity with an	egistered Agent, looppany cannot serve as active Florida registration	Registered Office, & Registered Agent's its own Registered Agent. You must designate an	10 F
Signature: (The Limited Liability C individual or another business entity with an	egistered Agent, lompany cannot serve as active Florida registration Florida street addresserves.	Registered Office, & Registered Agent's its own Registered Agent. You must designate an in.) ess of the registered agent are:	10 FEB -2
Signature: (The Limited Liability C individual or another business entity with an	egistered Agent, lompany cannot serve as active Florida registration Florida street addresserves. Mark S. Beans 2750 S.W. County R	Registered Office, & Registered Agent's its own Registered Agent. You must designate an in.) ess of the registered agent are:	10 FEB -2
Signature: (The Limited Liability C individual or another business entity with an	egistered Agent, lompany cannot serve as active Florida registration Florida street addresserves. Mark S. Beans 2750 S.W. County R	Registered Office, & Registered Agent's its own Registered Agent. You must designate an in.) ess of the registered agent are:	10 FEB -2
Signature: (The Limited Liability C individual or another business entity with an	egistered Agent, lompany cannot serve as active Florida registration Florida street addresserves. Mark S. Beans 2750 S.W. County R	Registered Office, & Registered Agent's its own Registered Agent. You must designate an in.) ess of the registered agent are:	10 FEB

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member MGRM	Mark S. Beans 2750 S.W. County Road 307A Trenton, FL 32693
	FRI O
	RETARY OF PA
	(Use attachment if necessary)
cument is filed by the Florida Departme	(OPTIONAL) nor more than 90 days after the date this ent of State; AND 2) must be the same as Certificate of Conversion, if an effective
REQUIRED SIGNATURE:	
Signature of a member or an au	thorized representative of a member.
of this document constitutes an af	408(3), Florida Statutes, the execution firmation under the penalties of perjury ated herein are true.)
Mark S. Beans	
Typed or prin	ted 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)