112000025718

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		•





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12 FEB 21 P1 4: 11

B. BOSTICK

FEB 2 2 2012

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Aegis Post Op, LLC	
(Name of	f Resulting Florida Limited Company)
	Articles of Organization, and fees are submitted to convert an Limited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerni	ing this matter to:
Robert Schaffer	
(Contact Person)	
(Firm/Company)	
9438 Oakmont Drive	
(Address)	
Grand Blanc, MI 48439	
(City, State and Zip Code)
rhschaffer11@comcast.net	
E-mail address: (to be used for future annual repo	ort notifications)
For further information concerning this m	natter, please call:
Robert Schaffer	at (810) 240-8236
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following amo	ount:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\int \text{S125 for Articles} \text{S125 for Articles} \text{S125 for Articles}	S180.00 Filing Fees and Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> 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" immedia	tely prior to the filing of this Certificate	of	
Conversion is:	P1100070692	:	
Aegis Post Op, Inc. (Enter Name of Oth	ner Business Entity)		
(2	, , , , , , , , , , , , , , , , , , ,		
2. The "Other Business Entity" is a corporation			
(Enter entity type. Example: cogeneral partnership, commo			
first organized, formed or incorporated under the laws			
(Enter state, or if a non-U.S. er	ntity, the name of the country)		
on August 8, 2011			
(Enter date "Other Business Entity" was	first organized, formed or incorporate	ed)	
3. If the jurisdiction of the "Other Business Entity" which it is now organized, formed or incorporated:	vas changed, the state or country under the	12)f
		ri Gi	والقولي است 12 - 12 12 - 12 - 12 - 12 - 12 - 12 - 1
4. The name of the Florida Limited Liability Compar	ny as set forth in the attached Articles of	f	e Secul
Organization:	United States	至	
Aegis Post Op, LLC		f = = = = = = = = = = = = = = = = = = =	آلودي د اد
(Enter Name of Florida Li	mited Liability Company)	i	
5. If not effective on the date of filing, enter the effective date: 1) cannot be prior to nor more filed by the Florida Department of State; AND 2) attached Articles of Organization, if an effective date	etive date: The than 90 days after the date this documents to the same as the effective date l		the
6. The conversion is permitted by the applicable law(s conversion complies with such law(s) and the require			ion.
7. The "Other Business Entity" currently exists on the currently organized, formed or incorporated.	e official records of the jurisdiction under	which i	it is

Signed this 28th day of December	20 <u>11</u>	
Signature of Member or Authorized Reg Individual signing affirms that the facts st constitutes a third degree felony as provid	ated in this document are true. Any fa	
Signature of Member or Authorized Represented Name: Robert Schaffer	sentative:	
Signature(s) on behalf of Other Business F this document are true. Any false informations. 8.817.155, F.S. [See below for required sign	Entity: Individual(s) signing affirm(s) tion constitutes a third degree felony	that the facts stated in
Signature: Printed Name: Robert Schaffer	Title: Director	
Signature:Printed Name:	Title:	
Signature:Printed Name:		
	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Directors or Officers have not been selected.	ctor, or Officer. d, an Incorporator must sign.	
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:	FLORID FLORID
If Florida Limited Partnership or Limited Signatures of <u>ALL</u> General Partners.	Liability Limited Partnership:	A
All others: Signature of an authorized person.		
Fees:		
Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional) Page 2 of 2	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

The mailing address and street address of the principal Office Address:	ncipal office of the Limited Liability Company is: Mailing Address:	
671 N.W. 118th Avenue Plantation, FL 33325	671 N.W. 118th Avenue Plantation, FL 33325	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another	
The name and the Florida street address of the reg	gistered agent are:	t
671 N.W. 118th Aver Florida street address (nue P.O. Box NOT acceptable)	A Care
Plantation City, S	FL 33325 State, and Zip	
company at the place designated in this certificate, agree to act in this capacity. I further agree to con	rept service of process for the above stated limited liabili I hereby accept the appointment as registered agent an apply with the provisions of all statutes relating to the ad I any familiar with and accept the obligations of my	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

Title: "MGR" = Manager "MGRM" = Managing	Name and Address: Member
MGR.	Nancy Blitz 671 N.W. 118th Avenue Plantation, FL 33325
MGRM	Robert Schaffer 9438 Oakmont Drive Grand Blanc, MI 48439
(Use attachment if nece	
(The effective date: 1) cannot the Florida Department of S	(OPTIONAL) It be prior to nor more than 90 days after the date this document is filed by State; AND 2) must be the same as the effective date listed in the attached an effective date listed therein.)
Signature of a m	ember or an authorized representative of a member.
the penalties of perjury that	608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the facts stated herein are true. I am aware that any false information submitted in a t of State constitutes a third degree felony as provided for in s.817.155, F.S.)
Robert Sch	Typed or printed name of signee
	D 4 64



January 5, 2012

ROBERT SCHAFFER 9438 OAKMONT DRIVE FLINT, MI 48532

SUBJECT: AEGIS POST OP, INC. Ref. Number: P11000070692

We have received your document for AEGIS POST OP, INC. and check(s) totaling \$212.50. However, your check(s) and document are being returned for the following:

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6028.

Letter Number: 712A00000237

Barbara Bostick Regulatory Specialist II

www.sunbiz.org