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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

2012 JUN -8 AM 8:

J. SAULSBERRY EXAMINER

JUN 11 2012

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

ALAN S. GASSMAN*+
LONDON L. BATES **†
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- * LL. M. IN TAXATION
- + BOARD CERTIFIED LAWYER IN WILLS, TRUSTS AND ESTATES
- ** CERTIFIED PUBLIC ACCOUNTANT
- *** LL.M. IN ESTATE PLANNING
- † CERTIFIED CIRCUIT COURT MEDIATOR

June 7, 2012 **VIA UPS**

VIA

2012 JUN -8 AM 8: 32 SECRETARY OF STATE

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

Dear Sir or Madam:

Attached for filing please find a Certificate of Conversion and Articles of Organization whereby LAROSA FAMILY LIMITED PARTNERSHIP, a Florida limited partnership, will convert into LAROSA FAMILY, L.L.C., a Florida limited liability company.

Also attached please find a check made payable to the Department of State in the amount of \$150.00 for filing fees.

Please provide our office with confirmation of filing in the enclosed self-addressed, stamped envelope.

Please contact me if you have any questions on the above.

Best regards,

Tina J. Mrvin

Florida Registered Paralegal

ASG:*tja Enclosures SASE

cc:

William LaRosa, Sr., M.D. (w/encl. via email **BMWLRDanes@hotmail.com** & U.S. Mail)

Stephen LaRosa, M.D. (w/ encl. via email stevelarosa54@yahoo.com & U.S. Mail)

Susan Cooper (w/ encl.)

William LaRosa, Jr. (w/ encl.)

J:\L\AROSA, William\Conversion of LaRosa Family Partnership into LLC\Sec. of State.1a.wpd 548

Jy 47 12

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" immediately prior to the filing of this Certificate Conversion is: | of | 0-13- |
| LAROSA FAMILY LIMITED PARTNERSHIP | 470 | 0-13 |
| (Enter Name of Other Business Entity) | 10 | <i>)</i> • • • • • • • • • • • • • • • • • • • |
| (Enter Name of Other Dusiness Entry) | | |
| 2. The "Other Business Entity" is a Limited Partnership | | |
| (Enter entity type. Example: corporation, limited partnership, | S | <u>28</u> |
| general partnership, common law or business trust, etc.) | CF. | ~ <u>~</u> |
| | ≘(π) | 2817 JUN |
| first organized, formed or incorporated under the laws of <u>Florida</u> | ?₹; , | co i |
| (Enter state, or if a non-U.S. entity, the name of the country) | 7 | garrar |
| 10/12/1004 | | Z !: |
| on 10/13/1994 . (Enter date "Other Business Entity" was first organized, formed or incorpora | fort) | & |
| (Enter date "Other Business Entity" was inst organized, for med or meorpora | Ditti \$ | ω N |
| 3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under which it is now organized, formed or incorporated: | | |
| 4. The name of the Florida Limited Liability Company as set forth in the attached Articles Organization: | of | |
| LAROSA FAMILY, L.L.C. | | |
| (Enter Name of Florida Limited Liability Company) | | |
| 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. | ument | is |
| filed by the Florida Department of State; <u>AND</u> 2) must be the same as the effective date attached Articles of Organization, if an effective date is listed therein.) | listed | in the |
| 6. The conversion is permitted by the applicable law(s) governing the other business entity as conversion complies with such law(s) and the requirements of s.608.439, F.S., in effecting the | nd the | ersion. |
| 7. The "Other Business Entity" currently exists on the official records of the jurisdiction und | er whic | h it is |

currently organized, formed or incorporated.

| Signed this 6th day of June | 20 <u></u> | |
|--|--|------------------------------------|
| Individual signing affirms that the facts sta | resentative of Limited Liability Company: ated in this document are true. Any false infored for in s.817.155, F.S. | mation |
| Signature of Member or Authorized Repres Printed Name: Alan S. Gassman | entative:Title: Authorized Representative | |
| Signature(s) on behalf of Other Business E this document are true. Any false informat s.817.155, F.S. [See below for required sign | ntity: Individual(s) signing affirm(s) that the find constitutes a transfer degree felony as providuature(s). | facts stated in ed for in |
| | | - |
| Signature: | Title: Auth. Rep. of Lake Onole Ranch, Inc., General Partner | |
| Frinted Name. Alan S. Gassman | Auth. Rep. of Lake Onole Ranch, Inc., General Partner | |
| Signature: | | |
| Printed Name: | Title: | |
| | | |
| Signature: | Title: | |
| Printed Name: | Title: | |
| Signature | | |
| Printed Name: | Title: | |
| Trinco rumo. | 100. | |
| Signature: | | |
| Printed Name: | Title: | |
| | | |
| Signature: | Title: | |
| Printed Name: | l itle: | |
| If Florida Corporation: Signature of Chairman, Vice Chairman, Directors or Officers have not been selected | | JUN -8 / DRETÁRY OF AHASSEE. |
| If Florida Consuel Doutroughin on Limited | Lightlitz Doutnoughin. | |
| If Florida General Partnership or Limited Signature of one General Partner. | Liability Farthership: | 유전 . 약 |
| Signature of one General Lattice. | | 3: 32 ATE PRID |
| If Florida Limited Partnership or Limited Signatures of ALL General Partners. | Liability Limited Partnership: | |
| All others: Signature of an authorized person. | | |
| Fees: | | |
| Certificate of Conversion: | \$25.00 | |
| Fees for Florida Articles of Organization: | \$125.00 | |
| Certified Copy: | \$30.00 (Optional) | |
| Certificate of Status: | \$5.00 (Optional) | |
| | Page 2 of 2 | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

| Principal Office Address: | Mailing Address: | |
|--|---|--|
| Lake Oriole Ranch | Lake Oriole Ranch | |
| 8481 Croom Rital Road | 8481 Croom Rital Rd. | |
| Brooksville, FL 34602 | Brooksville, FL 34602 | |
| (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the Alan S. Gassman 1245 Court Street Florida street address | ne registered agent are: Name | 2012 JUN -8 AM 8: 32 SECRETARY OF STATE TALLAHASSEE, FLORIDA |
| Clearwater | FL 33756 | |
| Ci | ty, State, and Zip | |
| Ci Having been named as registered agent and to company at the place designated in this certific | ty, State, and Zip accept service of process for the above | s registered agent and |

(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: | Name and Address: |
|---|--|
| "MGR" = Manager "MGRM" = Managing Mer | nher |
| MORWI — Managing Mei | nder |
| MGR | Lake Oriole Ranch, Inc. |
| | 8481 Croom Rital Rd. |
| | Brooksville, FL 34602 |
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| | SECRET |
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| | SSE -8 |
| (Use attachment if necessary | v) |
| • | |
| ICLE V: Effective date, if o | ther than the date of filing: |
| -8645 d-4 1\ 4 h | (OPTIONAL) |
| ellective date: 1) cannot be | prior to nor more than 90 days after the date this document is filed by ; AND 2) must be the same as the effective date listed in the attached |
| ificate of Conversion, if an e | |
| nonte of conversion, it an e | nective date instea therein, |
| | |
| <u>UIRED</u> SIGNATURE: | |
| <u>uired</u> signature: // // | |
| <u>uired</u> signature: | RosaWP |
| - un la | RosaWP |
| Signature of a member | r or an authorized representative of a member. |
| Signature of a member (In accordance with section 608.4 | r or an authorized representative of a member. 08(3), Florida Statutes, the execution of this document constitutes an affirmation under |
| (In accordance with section 608.4 the penalties of perjury that the fadocument to the Department of S | or or an authorized representative of a member. 08(3), Florida Statutes, the execution of this document constitutes an affirmation under acts stated herein are true. I am aware that any false information submitted in a tate constitutes a third degree felony as provided for in s.817.155, F.S.) |
| Signature of a member (In accordance with section 608.4 the penalties of perjury that the fa | or or an authorized representative of a member. 08(3), Florida Statutes, the execution of this document constitutes an affirmation under acts stated herein are true. I am aware that any false information submitted in a tate constitutes a third degree felony as provided for in s.817.155, F.S.) |

Page 2 of 2