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(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	····
(Ci	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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07/02/14--01024--018 **61.25

08/06/14--01020--001 **88.75

14 AUG -'S PM 1: 45 SECALIARY OF STATE ALLAHASSEE, FLORIDA

AUG - 6 2014

T. BROWN

atin Teresa Brown cover LETTER

TO: Registration Section Division of Corporations

SUBJECT: Jessica Anne Deeb LCSW, LLC

(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Marge Sindelar			
	(Contact Person)		
	(Firm/Company)	***************************************	
9400 River Crossi	ng Blvd., Suite 102		
	(Address)		
New Port Richey,	FL 34655		
(1	City, State and Zip Code)		
ard@hrpc.net			
E-mail Address: (to b	e used for future annual re	port notifications)	
For further informati	on concerning this ma	tter, please call:	•
Marge Sindelar		at (727) 376	-6831 xt 102
(Name of Conta	act Person)	(Area Code) (Day	ytime Telephone Number)
Enclosed is a check to	for 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 ADDRES	S:	MAILING A	
Registration Section	•	Registration	
Division of Corporat	ions	Division of C	•
Clifton Building		P. O. Box 63	27

Tallahassee, FL 32314

INHS11 (02/14)

2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 30, 2014

MARGE SINDELAR 9400 RIVER CROSSING BLVD STE 102 NEW PORT RICHEY, FL 34655

SUBJECT: JESSICA ANNE DEEB LCSW, LLC

Ref. Number: W14000046599

We have received your document for JESSICA ANNE DEEB LCSW, LLC and check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$93.75. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

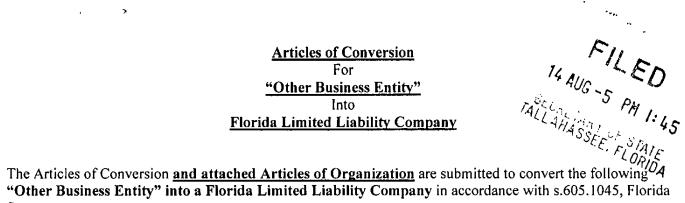
You submitted the wrong type of document, proper forms are enclosed.

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) 245-6051.

Tim Burch Regulatory Specialist II

Letter Number: 514A00016302



"Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Jessica Anne Deeb LCSW, LLP
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Partnership.
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of Florida
April 9, 2014 (Enter state, or if a non-U.S. entity, the name of the country)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Jessica Anne Deeb LCSW, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)
5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.

Page 1 of 2

Signed this 30 day of July	20 <u>_14</u>
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative: Printed Name: Jessica A. Deeb	Title: Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]
Signature: Printed Name: Jessica A. Deeb Signature:	_Title: Manager
Signature: Alex R. Deeb	_ Title: MGRM
Signature:Printed Name:	_ Title:
Signature:Printed Name:	_ Title:
Signature:Printed Name:	
Signature: Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Jessica Anne Deeb LCSW, LLC (Must end with the words "Limited Liability	v Company, "L.L.C." or "LLC.")
ARTICLE II - Address:	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
9400 River Crossing Blvd., Suite 102 New Port Richey, FL 34655	SAME
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re	red Agent. You must designate an individual or another
Alex R. Deeb Name	
9400 River Crossing Blvd. Florida street address (P.O.	
New Port Richey	FL 34655
City	Zip
liability company at the place designated in registered agent and agree to act in this capacit	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of all enformance of my duties, and I am familiar with and

ristered agent and agree to act in this capacity. I further agree to comply with the provisions of all tatutes 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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

The name and address of each perso Company:	
<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Jessica A. Deeb
	9400 River Crossing Blvd., Suite 102
	New Port Richey, FL 34655
AMBR	Alex R. Deeb
	9400 River Crossing Blvd., Suite 102
	New Port Richey, FL 34655
	<u> </u>
(Use attachment if necessary)	
effective date is listed, the date must	t be specific and cannot be more than five business de
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effective date is listed, the date must 0 days after the date of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE:	t be specific and cannot be more than five business de
effective date is listed, the date must 0 days after the date of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of a memb	er or an authorized representative of a member. (1) (b), Florida Statutes, the execution of this document halties of perjury that the facts stated herein are true, ubmitted in a document to the Department of State
REQUIRED SIGNATURE: Signature of a member	er or an authorized representative of a member. (1) (b), Florida Statutes, the execution of this document halties of perjury that the facts stated herein are true, ubmitted in a document to the Department of State wided for in s.817.155, F.S.)
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