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COVER LETTER

TO:

Registration Section

2661 Executive Center Circle

Tallahassee, FL 32301

Division of Corporations SUBJECT: SMS, L.L.C. (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: Eric B. Landry (Contact Person) Breazeale, Sachse & Wilson, L.L.P. (Firm/Company) 301 Main Street, 23rd Floor (Address) P. O. Box 3197 (Address) Baton Rouge, LA 70821 (City, State and Zip Code) E-mail: ebl@bswllp.com E-Mail Address: (to be used for future annual report notifications) For further information concerning this matter, please call: 381-8033 Saul R. Newsome at (225) Name of Contact Person (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$150.00 Filing Fees □ \$155.00 Filing Fees □\$180.00 Filing Fees a\$185.00 Filing Fees, (\$25 for Conversion and Certificate of and Certified Copy Certified Copy, and & \$125 for Articles Status Certificate of Status of Organization) STREET ADDRESS: **MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations** Clifton Building P. O. Box 6327

Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 7, 2016

ERIC B. LANDRY BREAZEALE, SACHSE & WILSON, L.L.P. 301 MAIN STREET, 23RD FLOOR BATON ROUGE, LA 70821

We have received your document for SMS, L.L.C. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

Please return the corrected original and one copy of 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) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 616A00014218

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

FILED

16 JUL 27 PH 2: 40

SECRETARY OF STATE TALLAHASSEE FLORIDA

The Articles 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.605.1045, Florida Statutes.

	The name of the "Other Business Entity" immediately prior to the filing of the Articles of rsion is: SMS, L.L.C.
2.	The "Other Business Entity" is a limited liability company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
on Apr	rganized, formed or incorporated under the laws of Louisiana (Enter state, or if a non-U.S. entity, the name of the country) il 3, 2006 e of organization, formation or incorporation)
	The name of the Florida Limited Liability Company as set forth in the attached Articles anization:
(Enter N 4.	rn Medical Solutions, L.L.C. ame of Florida Limited Liability Company) If not effective on the date of filing, enter the effective date:
days at be the effectiv Note: If	ffective date: 1) cannot be prior to date of receipt or filed date nor more than 90 fter the date this document is filed by the Florida Department of State; AND 2) must same as the effective date listed in the attached Articles of Organization, if an we date is listed therein.) The date inserted in this block does not meet the applicable statutory filing requirements, this date will not as the document's effective date on the Department of State's records.

The plan of conversion has been approved in accordance with all applicable statutes.

5.

Signed this _______ day of July, 2016. 16 JUL 27 PH 2: 40 Signature of Authorized Representative of Limited Liability Company: SECRETARY OF STATE TALLAHASSEE FLORIDA Signature of Authorized Representative: Printed Name: Title: Member Signature(s) on behalf of Other Business Entity: [See below for required signature(s)] Signature: Printed Name: Nicholas Shav Signature: Title: Printed Name: Signature: Title: Printed Name: Signature: Printed Name: Signature: Printed Name: Title: Signature: Title: Printed Name: If Florida Corporation: Signature of Chairman, Vice Chairman, Director or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:

Articles of Conversion:

Certified Copy:

Certificate of Status:

Fees for Florida Articles of Organization:

\$ 25.00

\$125.00

\$ 30.00 (Optional)

\$ 5.00 (Optional)

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name: The name of the Limited Liability Company is:	
Southern Medical Solutions, L.L.C.	
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address

Mailing Address

147 Grayton Street Santa Rosa Beach, FL 32459 P. O. Box 6457

Miramar Beach, FL 32550

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Nicholas Shay	D'S		
Name	LLA		ئنسن
147 Grayton Street	為司	N]}]:
Florida street address (P.O. Box NOT acceptable)	35 55 55 55 55 55 55 55 55 55 55 55 55 5	7	1
	men;	子	
Santa Rosa Beach, FL 32459	[m] (7)	Ÿ	
City Zip	至三	=	
	3 17.		

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 605, F.S.

Registered Agent's Signature (REQUIRED)

Nicholas Shay (CONTINUED)

ARTICLE IV — The name and address of each person author Company:	rized to manage and control t	FILED he Limited Liability 27 PM 2: 40
Title:	Name and Address:	SEGRETARY OF STATE TALLAHASSEE FLORIDA
<u>Member</u>	Nicholas Shay 147 Grayton Street Santa Rosa Beach, FL 3245	
<u>Member</u>	Mary Shay 147 Grayton Street Santa Rosa Beach, FL 3245	59
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than (OPTIONAL). (If an effective date is listed, the date must business days prior to or 90 days after the Note: If the date inserted in this block does not meet be listed as the document's effective date on the Dep ARTICLE VI: Other provisions, if any.	at be specific and cannot be a date of filing.) t the applicable statutory filing requ	
Nic Typed or pr	e with section 605.0203(1)(b), Florid in a document to the Department of as provided for in s.817.155, F.S. cholas Shay rinted name of signee	ida Statutes. I am of State constitutes
\$30.00 Certified Copy (Optional)	\$5.00 Certificate of S	