# 11000196074

(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
		:





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400291654754 10/26/16--01009--010 \*\*280,00

FILED SUFFICERCY SEFICING

C. GOLDEN
0CT 2 6 2016

### SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive
Tallahassee, Florida 32312
(850) 656-4724
SUNSHINECORPORATE2014@GMAIL.COM

Date: 10-26-16	•••
ENTITY NAME:	
Aveila of Tampa, LLC	
**PLEASE FILE THE ATTACHED AND RET	URN:**
Plain Copy	
XX Certified Copy	
**PLEASE OBTAIN THE FOLLOWING FOR THE AB Document Number:  Certified Copy of Arts & Amendments  Certificate of Good Standing	OVE ENTITY:**
**APOSTILLE'/NOTARIAL CERTIFICATION COUNTRY OF DESTINATION NUMBER OF CERTIFICATES REQUESTED	ON:**
TOTAL AMOUNT OWED: 180 CHECK NUMBER: 299 PLEASE CONTACT TINA AT 850-508-1891 FOR ANY PROBLEMS OR INFORMATION	N ON THIS MATTER.
Thank you!	the tight of the states.
Tina Goff, President	<del></del>

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#### **COVER LETTER**

Division of Co						
SUBJECT:	Avella of Tampa	, LLC				
SCHOLETT	(Name	of Resulting Florida L	imited	l Company)		
				d fees are submitted to c cordance with s. 605.10		"Other
Please return all corre	espondence concerning	g this matter to:				
Taylor K. Wirth, Esq.						
	(Contact Person)					
Bass, Berry & Sims, PLC						
	(Firm/Company)					
150 Third Ave. South, St	uite 2800					
	(Address)					
Nashville, TN 37201						
((	City, State and Zip Code)					
twirth@bassberry.com						
E-mail Address: (to b	e used for future annual re	port notifications)				
For further information	on concerning this ma	tter, please call:				
Taylor K. Wirth		at ( 615 )	742-	7805	_	
(Name of Conta	ct Person)	(Area Code)	(Day	time Telephone Number)	-	
Enclosed is a check f	or the following amou	ınt:				
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	☐\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing F and Certified Copy		\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
STREET ADDRES Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 323	ions er Circle	Registra Divisior P. O. Bo	tion S of C ox 632	Corporations		16 001 28 FB
INHS11 (06/15)						2: 39

## Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

FILED 16 001 25 FU 2:39 1 :27 .5 11 %.

The Articles of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

Oncology Plus Incorporated	ss Entity" immediately prior to the filing of the Articles of Conversion is:
(Er	nter Name of Other Business Entity) P010000 39410
2. The "Other Business Entity" is	a corporation
·	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorpo	rated under the laws of Florida
on(date of organization, formation or in	
(date of organization, formation or in	corporation)
3. The name of the Florida Limite	d Liability Company as set forth in the attached Articles of Organization:
Avella of Tampa, LLC	
(Enter Nam	e of Florida Limited Liability Company)
4. If not effective on the date of fi	ling, enter the effective date:
date this document is filed by th date listed in the attached Articl	e prior to date of receipt or filed date nor more than 90 days after the e Florida Department of State; <u>AND</u> 2) must be the same as the effective es of Organization, if an effective date is listed therein.) be not meet the applicable statutory filing requirements, this date will not be listed as the ment of State's records.
5. The plan of conversion has been	approved in accordance with all applicable statutes.

Signed this 25th day of October	20 16
Signature of Authorized Representative of Limi	ted Linbility Company:
Signature of Authorized Representative:	Alice Charles
Signature of Authorized Representative:	acj Elist
Printed Name: Zachary Scholl	Title: President
	ž.
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Sieden Sholl	
Printed Name Jachary Scholl	Title: President
77	
Signature:	
Printed Name:	Title:
Signature:	
Primed Name:	Title:
Signature:	
Printed Name:	_ Title:
Norman o	
Signature:	The
Timed Name.	Tatle:
Sianoture	
Signature:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
f Directors or Officers have not been selected, an Inc	corporator must sign.
·	
<u>lf Florida General Partnership or Limited Liabili</u>	ty Partuership:
Signature of one General Partner.	
f Florida Limited Partnership or Limited Liabili	<u>ty Limited Partnership;</u>
Signatures of ALL General Partners.	
A H othous	
<u>All others:</u> Signature of an authorized person.	
nguature of an authorized person.	
<u>'ees:</u>	
\$ \$13. ************************************	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
centificate of Status.	Soloo (Optional)
	Nega 2 of 3

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#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:  The name of the Limited Liability Company is:  Avella of Tampa, LLC  (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	26 PM 203 <b>9</b> -
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")  ARTICLE II - Address:	
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")  ARTICLE II - Address:	· ·
ARTICLE II - Address:	
The maining address and street address of the principal office of the Diffice Diability	Company is:
	Company 15.
Principal Office Address: Mailing Address:	
1070 E. Brandon Boulevard 1070 E. Brandon Boulevard	_
Brandon, FL 33511 Brandon, FL 33511	_ _
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Sign (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or	
business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:	
business entity with an active Florida registration.)	
business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:	
business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:  NRAI Services, Inc.	
business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:  NRAI Services, Inc.  Name	
business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:  NRAI Services, Inc.  Name  1200 South Pine Island Road	

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..

1410-11-parvices, inc.

Registered Agent's Signature (REQUIRED)

Natalie Leiba-Paul - Assistant Secretary

(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Zachary Scholl
	3002 Bryan Road
	Brandon, FL 33511
	**************************************
	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·
effective date is listed, the date m	the date of filing: (OPTIONAL) ust be specific and cannot be more than five business day
ICLE V: Effective date, if other than a effective date is listed, the date may 90 days after the date of filing.)	ust be specific and cannot be more than five business day eet the applicable statutory filing requirements, this date will not be list
ICLE V: Effective date, if other than a effective date is listed, the date me 90 days after the date of filing.) If the date inserted in this block does not ment's effective date on the Department of State of the Department of the Department of State of the Depart	ust be specific and cannot be more than five business day set the applicable statutory filing requirements, this date will not be list late's records.
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ICLE V: Effective date, if other than a effective date is listed, the date me 90 days after the date of filing.) If the date inserted in this block does not ment's effective date on the Department of Start ICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a men This document is executed I am aware that any false in	neet the applicable statutory filing requirements, this date will not be list rate's records.  The property of a member of a member of a member of an authorized representative of a member of a membe
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ARTICLE IV-