

L17000074108

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

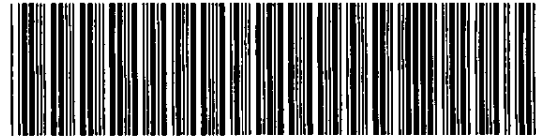
(Document Number)

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17 APR -4 PM 3:21
DEPT. OF REVENUE
ALABAMA STATE CAPITAL
ALABAMA STATE CAPITAL

T. BURCH
APR 5 2017

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Dr. Klein, Optometry, 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:

Michael De Biase, Esq.

(Contact Person)

Tobin & Reyes, P.A.

(Firm/Company)

225 N.E. Mizner Boulevard, Suite 510

(Address)

Boca Raton, Florida 33432

(City, State and Zip Code)

mdebiase@tobinreyes.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Michael De Biase

at (561) 620-0656

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☒ \$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 ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center
Circle Tallahassee, FL
32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 31, 2017

MICHEAL DE BIASE, ESQ
225 NE MIZNER BLVD STE 510
BOCA RATON, FL 33432

SUBJECT: DR. KLEIN, OPTOMETRY, LLC
Ref. Number: W17000027581

We have received your document for DR. KLEIN, OPTOMETRY, LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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) 245-6052.

Tim Burch
Regulatory Specialist III

Letter Number: 817A00006210

**Certificate of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company**

FILED
17 APR -4 PM 3:22
CLERK OF DISTRICT COURT
JANUARY 10 2017

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

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: Dr. Klein, Optometry, P.A.
2. The "Other Business Entity" is a Florida professional corporation, first organized, formed or incorporated under the laws of the State of Florida on January 8, 1979 (Document No. '605926).
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization is Dr. Klein, Optometry, LLC.
4. This conversion shall be effective as of the date of filing.
5. The plan of conversion has been approved in accordance with all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under Sections 605.1006 and 605.1061-1072, Florida Statutes.

Signed this 28th day of March, 2017.

Signature of Authorized Representative of Limited Liability Company:

Dr. Klein, Optometry, LLC

By: Paul Klein OD
Name: PAUL KLEIN, OD
Title: Authorized Representative

Signature of Authorized Representative of Other Business Entity:

Dr. Klein, Optometry, P.A.

By: Paul Klein OD
Name: PAUL KLEIN, OD
Title: Authorized Representative

**ARTICLES OF ORGANIZATION
OF
DR. KLEIN, OPTOMETRY, LLC**

ARTICLE I

The name of this Limited Liability Company is Dr. Klein, Optometry, LLC.

ARTICLE II

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

Principal Office Address:

2502 East Oakland Park Blvd.
Ft. Lauderdale, Florida 33306

Mailing Address:

2502 East Oakland Park Blvd.
Ft. Lauderdale, Florida 33306

ARTICLE III

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

Paul Klein
2502 East Oakland Park Blvd.
Ft. Lauderdale, Florida 33306

ARTICLE IV

The Limited Liability Company's purpose is to conduct business for all lawful purposes.

ARTICLE V

These Articles of Organization are effective as of the date of filing.

The undersigned authorized representative does make and file these Articles of Organization for Florida Limited Liability Company Dr. Klein, Optometry, LLC effective as of the date first set forth above.

By: _____

Name: _____

Title: Authorized Representative

SECRETARY OF STATE
TALLAHASSEE, FLORIDA


17 APR -4 PM 3:21

FILED

REGISTERED AGENT ACKNOWLEDGMENT

Having been named as registered agent and to accept service of process for Dr. Klein, Optometry, LLC, a Florida limited liability company, at the place designated on 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 in Chapter 605, Florida Statutes.

Dated this 27th day of March, 2017.


Dr. Paul Klein, OD

FILED
17 APR -4 PM 3:21
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA