

L18000133464

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

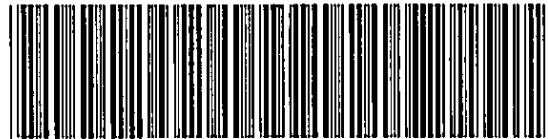
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600313677606

05/25/18--01016--008 **150.00

FILED
18 MAY 25 PM 12:46
SECRET
FBI/DOJ

M. MOON
MAY 30 2018

COSTELLO & WICKER, P.A.

ATTORNEYS AT LAW

Voice (239) 939-2222 • Facsimile (239) 939-2280

John M. Wicker, P.A., Managing Attorney
Also member of Florida Institute of Certified Public Accountants

Brittany Professional Centre
12670 New Brittany Blvd., Suite 101
Fort Myers, FL 33907

Truman J. Costello, P.A., 1949 - 2011

Mailing Address
Post Office Drawer 60205
Fort Myers, FL 33906-6205

May 22, 2018

Florida Department of State
Division of Corporations
Corporate Filings
Post Office Box 6327
Tallahassee, FL 32314

Sent By:
Regular Mail

**Re: ARTICLES OF CONVERSION FOR OTHER BUSINESS ENTITY
"STONERIDGE PARTNERS, LLC" INTO FLORIDA LIMITED LIABILITY
COMPANY**

Dear Sir or Madam:

Please find enclosed the following:

1. Our firm's check #7750 in the amount of \$150.00 being \$25 for conversion and \$125 for Florida Profit Articles of Incorporation.
2. Articles of Conversion for Other Business Entity into FL LLC
3. Articles of Organization for Florida Limited Liability Company
4. Stamped, addressed return envelope for correspondence.

Please do not hesitate to contact my office if there are any questions or concerns.

Thank you for your time and attention to this matter.

Very truly yours,



Michele M. Wicker
For the Firm

Direct Dial: (239) 690-4269
E-mail: mwicker@lawcrw.com

Enclosures: As Noted Above

RECEIVED
DIVISION OF CORPORATIONS
18 MAY 25 PM 12:46
TALLAHASSEE, FL 32314

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

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
STONERIDGE PARTNERS, LLC MI600000792

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a LLC
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of KENTUCKY
(Enter state, or if a non-U.S. entity, the name of the country)

on JANUARY 26, 2016
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:
STONERIDGE PARTNERS, LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: 5/22/2018
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

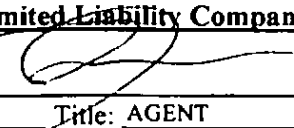
5. The plan of conversion has been approved in accordance with all applicable statutes.

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 ss. 605.1006 and 605.1061-605.1072, F.S.

FILED
18 MAY 25 PM 12:46
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

Signed this 9 day of MAY 20 18

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: 
Printed Name: JOHN M. WICKER, ESQ Title: AGENT

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: 
Printed Name: RICHARD TINSLEY Title: MANAGER

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

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:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

FILED
18 MAY 25 PM 12:46
CLERK OF CIRCUIT COURT
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

STONERIDGE PARTNERS, LLC

(Must contain 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:

9160 FORUM CORPORATE PARKWAY

SUITE 326

FORT MYERS, FL 33905

Mailing Address:

710 BRECKENRIDGE LANE

SUITE 301

OUISVILLE, KY 40207

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:

JOHN M. WICKER

Name

12670 NEW BRITTANY BLVD, SUITE 101

Florida street address (P.O. Box **NOT** acceptable)

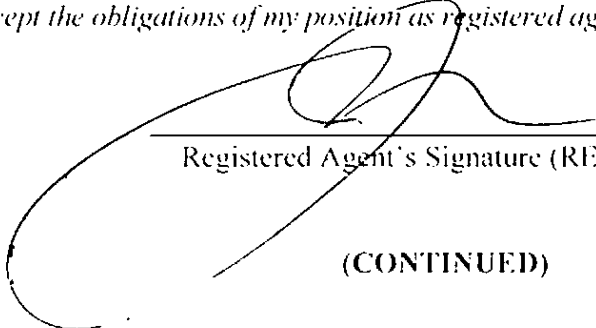
FORT MYERS

FL 33907

City

Zip

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)

(CONTINUED)

FILED
18 MAY 25 PM 12:46
CLERK OF CIRCUIT COURT
JACKSONVILLE, FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

RICHARD TINSLEY

710 BRECKENRIDGE LANE, SUITE 301

LOUISVILLE, KY 40207

MGR

MEDLINK INC.

710 BRECKENRIDGE LANE, SUITE 301

LOUISVILLE, KY 40207

MGR

BENJAMIN ADAM BOGAN

710 BRECKENRIDGE LANE, SUITE 301

LOUISVILLE, KY 40207

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

JOHN M. WICKER, ESQ

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

FILED
18 MAY 23 11:12:46
CLERK OF THE
SOLICITOR GENERAL'S
OFFICE
TALLAHASSEE, FLORIDA