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	Requestor's Name)	_
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(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to	o Filing Officer:	

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SECRETARY OF STATE

### **COVER LETTER**

TO: New Filing S Division of C				
SUBJECT: LEXIUM	I MIAMI PLLC			
		sulting Florida Limit	ed Con	ipany)
				d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all corr	espondence concernin	g this matter to:		
JOHN G. CRIVELLI				
	(Contact Person)			
LEXIUM MIAMI PLLO				
	(Firm/Company)			
848 BRICKELL AVEN	UE STE 1220			
	(Address)			
MIAMI, FL 33131				
(	City, State and Zip Code)			
JOHN.CRIVELLI@LEX	XIUMLEGAL.COM			
E-mail Address: (to l	pe used for future annual re	port notifications)		
For further informat	ion concerning this ma	tter, please call:		
JOHN G. CRIVELLI		at ( <sup>305</sup>	902-1	553
(Name of Cont.	act Person)		(Day	time Telephone Number)
	for the following amou a bank located in the	•	rocess	sed by this office must be payable in US
■ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		☐\$185.00 Filing Fees. Certified Copy, and Certificate of Status
STREET ADDRES	SS:	MAILI	NG A	ADDRESS:
New Filing Section		New Fi	_	
Division of Corporat	tions	Divisio P. O. B		Corporations
Clifton Building 2661 Executive Cen	ter Circle			FL 32314

Tallahassee, FL 32301

#### Articles of Conversion

For

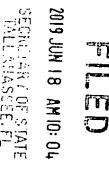
## "Other Business Entity"

Into

#### Florida Limited Liability Company

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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: JOHN G. CRIVELLI PA
(Enter Name of Other Business Entity)
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 incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
OCTOBER 31, 2012
OCTOBER 31, 2012  (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
LEXIUM MIAMI PLLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(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.



Signed this	day of JUNE	20_19
Signature of A	Authorized Representative of Lim	ited Liability Company:
Signature of A	uthorized Representative:	
Printed Name:		Title:
Signature(s) o	n behalf of Other Business Entity:	[See below for required signature(s)]
Simotura: /	/	Title: PRESIDENT
Printed Name:	JOAN G. CRIVELLI	Title: PRESIDENT
	<u> </u>	
Signature:		Title:
Printed Name:		Title:
C: .		
Signature:		Title:
rimed Name.		THUC
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
-		
If Florida Cor		
_	hairman, Vice Chairman, Director, or	
If Directors or	Officers have not been selected, an h	icorporator must sign.
If Florida Ger	eral Partnership or Limited Liabil	ity Partnershin:
	ne General Partner.	
-		
	<u>nited Partnership or Limited Liabil</u>	ity Limited Partnership:
Signatures of A	ALL General Partners.	
All others:		
	authorized person.	
J	,	
Fees:		
		22.5.00
	s of Conversion:	\$25.00
	or Florida Articles of Organization:	\$125.00 \$30.00 (Optional)
	ed Copy: cate of Status:	\$30.00 (Optional) \$5.00 (Optional)
Comm	ome or platus.	Solve (Opinional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Name: le Limited Liability Compa	ny is:	
LEXIUM MIAMI	I PLLC		
	(Must contain the words "Limited	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - The mailing ad		the principal office of the Limited Liability C	ompany
Principal Offi	ce Address:	Mailing Address:	
848 BRICKELL A MIAMI FL 33131	AVENUE, STE 1220	848 BRICKELL AVENUE, STE 1220 MIAMI FL 33131	
(The Limited Liabil		stered Office, & Registered Agent's Signature Registered Agent. You must designate an individual or ano	
The name and	the Florida street address of	f the registered agent are:	
	JOHN G. CRIVELLI		
		Name	
	848 BRICKELL AVENUE	E STE 1220	
	<del></del>	(D.O. D NOT	
	Florida street address	s (P.O. Box NOT acceptable)	
	Florida street address	FL 33131	

is:

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)

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

E 1220
of a member Statutes. I am aware that utes a third degree felon

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)