

L19000237083

(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:

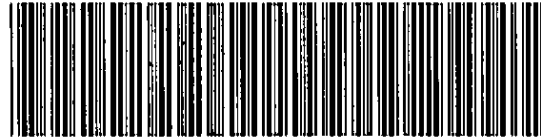
6227-9/20/19

WIA-79756

Office Use Only

K. PAGE

OCT 01 2019



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06/21/19--01023--010 **185.00

RECEIVED
19 SEP 30 PM 3:48
JALAPASS, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 20, 2019

ROBERTO J PIERRE
1670 RACHEL'S RIDGE LOOP
OCOE, FL 34761-9000

SUBJECT: YAHWEH ORTHOTIC LAB INC
Ref. Number: W19000079756

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

Due to transmission problems, your faxed document or coversheet is illegible or incomplete. Please refax the document and cover sheet to this office for processing.

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.

Keyna E Page
Regulatory Specialist II

Letter Number: 619A00019465



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 29, 2019

ROBERTO J PIERRE
1670 RACHEL'S RIDGE LOOP
OCOOEE, FL 34761-9000

SUBJECT: YAHWEH ORTHOTIC LAB INC
Ref. Number: W19000079756

We have received your document for YAHWEH ORTHOTIC LAB INC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

THE ARTICLES ARE MISSING THE FIRST PAGE. PLEASE COMPLETE THE FORM AND SEND BACK.

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.

Keyna E Page
Regulatory Specialist II

Letter Number: 619A00017869

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: YAHWEH ORTHOTIC LAB 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:

ROBERTO J PIERRE

(Contact Person)

YAHWEH ORTHOTIC LAB LLC

(Firm/Company)

1670 RACHEL'S RIDGE LOOP

(Address)

OCOOE, FL 34761-9000

(City, State and Zip Code)

robertpierres@gmail.com

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

For further information concerning this matter, please call:

ROBERTO J PIERRE

at (407)

509-1457

(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

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:
YAHWEH ORTHOTIC LAB INC (S-CORP)

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a S-CORP (P18-20541)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

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

on 3/14/2017
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
YAHWEH ORTHOTIC LAB LLC

(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.

TALLAHASSEE, FLORIDA
19 SEP 30 PM 3:48
DIVISION OF CORPORATIONS

TALLAHASSEE, FLORIDA
19 AUG 29 AM 9:26
DIVISION OF CORPORATIONS

Signed this 06 day of 19 2019

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: Robert J. Pierre
Printed Name: ROBERTO J PIERRE Title: MGR

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

Signature: Robert J. Pierre Title: President
Printed Name: Robert J Pierre

Signature: _____ Title: _____
Printed Name: _____

Signature: _____ Title: _____
Printed Name: _____

Signature: _____ Title: _____
Printed Name: _____

Signature: _____ Title: _____
Printed Name: _____

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

19 SEP 30 PM 3:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

19 AUG 29 AM 9:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Yahweh Orthotic Lab Limited Liability Corporation

(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:

1670 Rachel's Ridge Loop
Ocoee, Florida 34761

Mailing Address:

1670 Rachel's Ridge Loop
Ocoee, Florida 34761

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:

Roberto J Pierre

Name

1670 Rachel's Ridge Loop

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

Ocoee

FL

34761

City

State

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)

19 SEP 30 PM 3:48
JALAHASSA, 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:

Roberto J Pierre

1670 Rachel's Ridge Loop

Ocoee, FL 34761

AMBR

Roena C Pierre

1670 Rachel's Ridge Loop

Ocoee, FL 34761

(Use attachment if necessary)

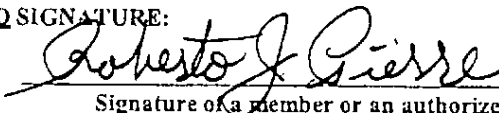
ARTICLE V: Effective date, if other than the date of filing: 9/30/2019 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

ARTICLE VI: 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.

Roberto J Pierre

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
TALLAHASSEE, FLORIDA
19 SEP 30 PM 3:48