

L19000284/49

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

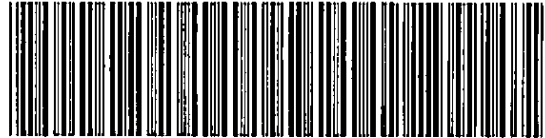
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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11/14/19--01014--010 \*\*125.00

11/14/19--01014--011 \*\*25.00

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JENNIS

J DENNIS  
DEC 04 2019



DUNLAP | MORAN

ATTORNEYS AT LAW

November 13, 2019

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8763-4

**VIA: FEDEX DELIVERY**  
(Tracking #: 7769-7473-8025)

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

**Re: Articles of Organization, Air A Med, LLC  
Certificate of Conversion, Air A Med, Inc., into Air A Med, LLC**

Dear Sir or Madam:

**Enclosed** herewith please find the following:

1. Articles of Organization for Air A Med, LLC (to be filed **first**);
2. Check in the amount of \$125.00 for the formation of the Florida LLC;
3. Articles of Conversion (to be filed **second**); and
4. Check in the amount of \$25.00 for the conversion.

**Step One:**

Please file the Articles of Organization first, so that the Florida LLC is in existence prior to the conversion.

**Step Two:**

Please then file the Certificate of Conversion, so that Air A Med, **Inc.**, will convert into Air A Med, **LLC**.

Please return all correspondence concerning this matter to:

Carol Ann DeMaria  
c/o John A. Moran  
PO Box 3948  
Sarasota, FL 34230-3948

JMoranStaff@DunlapMoran.com

Should you have any questions regarding the foregoing, please feel free to contact me at (941) 366-0115.

Very truly yours,

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**DUNLAP & MORAN, P.A.**

*Dictated but Not Read  
To Avoid Delay in Sending*

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John A. Moran

CC: Carol Ann DeMaria & Robert V. DeMaria (U.S. Mail First Class)  
Enclosures

JAM:CMB/8763-4/Correspondence/Letter to FI Division of Corporate Conversion

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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:  
Air A Med, Inc. - P95000051548

(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 Florida  
(Enter state, or if a non-U.S. entity, the name of the country)

on July 3, 1995  
(date of organization, formation or incorporation)

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

Air A Med, LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: date of filing  
(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 13<sup>th</sup> day of November 2019.

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**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: Carol Ann DeMaria  
Printed Name: Carol Ann DeMaria Title: Manager

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

Signature: Carol Ann DeMaria  
Printed Name: Carol Ann DeMaria Title: Director

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)

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ARTICLES OF ORGANIZATION  
OF

AIR A MED, LLC

The undersigned certifies that we have associated ourselves together for the purposes of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. We further declare that the following Articles shall serve as the Charter and authority for the conduct of business of the limited liability company.

ARTICLE I

NAME OF BUSINESS

The name of the limited liability company shall be AIR A MED, LLC.

ARTICLE II

PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The street address of the principal office of the company is: 7830 Drew Circle #10, Fort Myers, FL 33967 and mailing address of the company is 7830 Drew Circle #10, Fort Myers, FL 33967, in the County of Lee, State of Florida, but it shall have the power of authority to establish branch offices at any other place or places as the members may designate.

ARTICLE III

INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The name and address of the initial registered agent of the limited liability company is: John A. Moran, 22 S. Links Ave. Suite 300, Sarasota, Florida 34236, in the County of Sarasota, State of Florida.

*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

Typed Name: John A. Moran

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ARTICLE IV

MANAGEMENT

The name and address, including e-mail address, of each person authorized to manage and control the Limited Liability Company is:

<u>Title:</u>	<u>Name and Address:</u>
MGR	Carol Ann DeMaria 7830 Drew Circle #10 Fort Myers, FL 33967

Email Address: JMoranStaff@DunlapMoran.com

ARTICLE V

EFFECTIVE DATE

Effective date is the date of filing.

ARTICLE VI

OTHER PROVISIONS

In addition to the powers authorized by the laws of the State of Florida for limited liability companies, the general nature of the business or businesses to be transacted, and which the limited liability company is authorized to transact, shall be to engage in any activity or business authorized under the Florida statutes, and as further defined in the Company's Operating Agreement.

The undersigned, being an authorized representative, or member, of the limited liability company, certifies that this instrument constitutes the Articles of Organization of AIR A MED, LLC.

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 section 817.155, Florida Statutes.

Executed by the undersigned on the 13<sup>th</sup> day of November, 2019.

  
Authorized Representative or Member  
Typed Name: Carol Ann DeMaria

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OF

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Title:                      Name and Address:

MGR                      Carol Ann DeMaria  
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Fort Myers, FL 33967

Email Address: JMoranStaff@DunlapMoran.com

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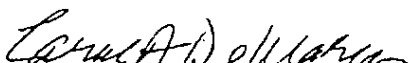
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