L20000055877

(Requestor's Name)	
(Address)	
(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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LYCORETARY OF STATE
LYCORETARY OF CORPORATIONS
19 BEC 27 PM 1: 37

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Full Core, L.	L.C. Florida Limited Company)
	Organization, and fees are submitted to convert an "Other y Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this	matter to:
Paul Gianneschi (Contact Person) Full Core, L.C. (Firm/Company)	
1363 W. Co. Hwy. 30	<u>A #11</u> 18
Santa Rosa Beach, F (City, State and Zip Code) Pajanneschi Chatchme	<u>L 32</u> 459
Pajanneschi Chatchme Email Address: (to be used for future annual report no	tifications)
For further information concerning this matter, present Gianneschi at (Name of Contact Person)	
Enclosed is a check for the following amount: (A dollars and drawn on a bank located in the Unite	III checks processed by this office must be payable in US d States)
	180.00 Filing Fees Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32301

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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: Full Core, L.L.C. (Enter Name of Other Business Entity)
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Georgia Limited Liability Company (Enter entity type. Example: corporation limited partnership, general partnership, common law or business test, etc.)
First organized, formed or incorporated under the laws of
on 8/29/2011 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Full Core, L.L.C. (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: Jan. 1, 2020 (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

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

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

which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.

document's effective date on the Department of State's records.

19 RFC 27	INISION OF CORPORATIONS
PM 2: 37	DEPURATIONS

Signed this 20th day of December	- 20 /9	
Signature of Authorized Representative of Limi	-	
Signature of Authorized Representative. The Printed Name: Fav Glanneschi	Title: Manager_	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]	
Signature: Pav/ 8. Gianneschi	Title: Tresident	
Signature:Printed Name:	Title:	
Signature: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 <u>ALL</u> 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: Certificate of Status:

\$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Full Core, L.L.C.

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

City

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1363 W. Co. Hwy. 30A, \$1118 Santa Rosa Beach, FL 32459	1363 W. Co. Hwy. 30A #1118 Santa Rosa Beach, FL 32459
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	d Office, & Registered Agent's Signature: stered Agent. You must designate an individual or another
The name and the Florida street address of the	registered agent are:
Paul Giann	eschi eschi
Nam	27 CFR
1363 W. Co. H. Florida street address (P.Co.	Wy. 30A D. Box NOT acceptable)
Souta Rosa Beach	L FI 32459

Registyred Agent's Signature (REQUIRED)

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..

Zip

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Paul Gianneschi 1363 W. Co. Hwy 30A #11/8 Santa Rosa Beach, FL 32459
<u> </u>	385. Peak Laguna Niguel, CA 92677
Mgr.	Alec Goldenberg, M.D. 157 East 32nd Street New York, NY 10016
(Use attachment if necessary)	
ARTICLE V: Other provisions, if any.	·
REQUIRED SIGNATURE:	`
This document is executed in accordance wany false information submitted in a docume as provided for in s.817.155, F.S.	n authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware that ent to the Department of State constitutes a third degree felony
Paul R. Gi	anneschi
Тур	ed or printed name of signee
	Filing Fees Opening tion and Designation of Registered Agent
\$125.00 Filing Fee for Articles of \$ 30.00 Certified Copy (Optiona	Organization and Designation of Registered Agent l) \$ 5.00 Certificate of Status (Optional)

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

ARTICLE IV-

Company: