

120000360963

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

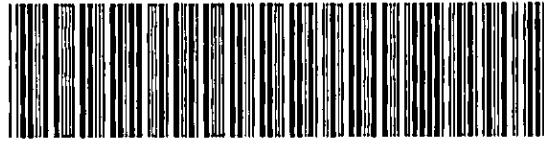
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GASSMAN, CROTTY & DENICOLA, P.A.

ATTORNEYS AT LAW

ALAN S. GASSMAN**
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~CERTIFIED PUBLIC ACCOUNTANT

**November 16, 2020
VIA UPS**

Florida Department of State
Division of Corporations
New Filing Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**Re: LAXMISRI DVM PA
Document Number: P11000067966**

Dear Sir/Madam:


Enclosed for filing please find Articles of Conversion and Articles of Organization whereby LAXMISRI DVM PA, a Florida profit corporation, will convert into LAXMISRI DVM, L.L.C., a Florida limited liability company.

Also enclosed please find a check made payable to Department of State in the amount of \$150.00 for filing fees.

Please return the filed document to our office in the enclosed self-addressed, stamped envelope.

Please contact Tina Arvin of my office if you have any questions on the above.

Best personal regards,


Alan S. Gassman

Florida Department of State
November 16, 2020
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ASG:tja
Enclosures
SASE

cc: Sree Reddy, DVM, MS (w/ encl. via email skanuganti@yahoo.com)

J:\R\Reddy, Dr. Sree\LAXMISRI DVM PA (FL)\Conversion to FL LLC\FL Sec. of State.1a.wpd
9794

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:
LAXMISRI DVM PA
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a profit 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 07/28/2011
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:
LAXMISRI DVM, L.L.C.
(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.

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Signed this 1st day of November 2020

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: B. Smully
Printed Name: SANDHYA BOYAPALLE Title: Manager

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

Signature: B. Smully
Printed Name: SANDHYA BOYAPALLE Title: President

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LAXMISRI DVM, L.L.C.

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

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

27027 State Road 56

Wesley Chapel, FL 33544

Mailing Address:

27027 State Road 56

Wesley Chapel, FL 33544

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:

ALAN S. GASSMAN, ESQ.

Name

1245 Court Street

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


Clearwater

City

FL 33756

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)

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:

SANDHYA BOYAPALLE

27027 State Road 56

Wesley Chapel, FL 33544

(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.

SANDHYA BOYAPALLE, Manager

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)

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