# L20000390300

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sasinosa Entity, Hame)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer.

Office Use Only



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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	12/17/2020		
Name:	Merritt Wa	lker	<del>_</del> _
Reference #	1303	938	<del></del>
			RCING ADMIN GROUP, LLC
✓ Article	es of Incorporation	/Authorizatio	n to Transact Business
☐ Amer	ndment		
☐ Chan	ge of Agent		
☐ Reins	statement		
✓ Conv	ersion		
☐ Merg	er		
☐ Disso	lution/Withdrawal		
Fictiti	ous Name		
✓ Other	с	ERTIFIED CO	PY OF THE FILING EVIDENCE
Authorized A	Amount:	\$180	
Signature:		mw	

F: 800.944.6607

P: +852.2682.9633



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	12/17/2020	_	
Name:	Merritt Walk	er	
Reference #	130393	8	
			G ADMIN GROUP, LLC
✓ Articl	es of Incorporation/Aเ	uthorization to Tr	ansact Business
☐ Ame	ndment		
☐ Char	nge of Agent		
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✓ Conv	ersion		
☐ Merg	er		
☐ Disso	olution/Withdrawal		
☐ Fictit	ious Name		
✓ Othe	rCER	TIFIED COPY OF	THE FILING EVIDENCE
Authorized /	Amount:	\$180	-
Signature: _	m	w	_

F: 800.944.6607

### COVER LETTER

	Filing Scion of Co	ction rporations			
SHRIECT:	Oasis Ou	Isourcing Admin Group,	LLC		
gonarer		(Name of Resi	ılting Florida Limi	ted Com	pany)
The enclosed Business Enti	Articles ity" into	of Conversion, Articl a "Florida Limited Lia	es of Organizat ability Compan	ion, and y" in ac	d fees are submitted to convert an "Other cordance with s. 605.1045, F.S.
Please return	all corre	spondence concerning	this matter to:		
Delaney J. Jai	ffarian			_	
		(Contact Person)			
Nixon Peabod	ly LLP			_	
•		(Firm/Company)			
1300 Clinton S	Square			_	
		(Address)			
Rochester, N					
	(C	ity, State and Zip Code)			
slschaeffer@p				_	
E-mail Add	ress: (to be	used for future annual rep	oort notifications)		
For further in	ıformatic	on concerning this mat	ter, please call:		
Delaney J. Ja	ffarian		at ( <sup>585</sup>	) 263-	1489  time Telephone Number)
(Name	e of Conta	et Person)	(Area Code	(Day	time Telephone Number)
		or the following amou a bank located in the		process	sed by this office must be payable in US
\$150.00 Fili (\$25 for Conve & \$125 for Arti of Organization	rsion icles	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co	-	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
New Divis P.O.	Box 632	ection orporations		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

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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:  Oasis Outsourcing Admin Group, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation P150000 101623  (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)
12/11/2015 (effective date)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Oasis Outsourcing Admin Group, 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.

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 ofDecembe	r 20 <u>20</u> .
Signature of Author	orized Representative	of Limited Liability Company:
0° . 6 A 11	( 1 D	July 1
Printed Name John C	ized Kepresentative: Gibson	Title: Manager
rimed Name, com	J.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- V
Signature(s) on beh	71 2	Intity:  Sec below for required signatu
Signature:	Joh	7
Printed Name: John C		Title: Vice President'
	$\mathcal{O}_{-}$	/
		Tille
rainica iyame:		Tille:
Signature:		
Printed Name:		Title:
Signatura		
Printed Name		Title:
Signature:	······	Title:
Printed Name!		Title:
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Printed Name:		Title:
	an, Vice Chairman, Dire	ctor, or Officer. d, an Incorporator must sign.
Signature of Chairma If Directors or Office If Florida General 1	an, Vice Chairman, Dire ers have not been selecte Partnership or Limited	d, an Incorporator must sign.
Signature of Chairma If Directors or Office	an, Vice Chairman, Dire ers have not been selecte Partnership or Limited	d, an Incorporator must sign.
Signature of Chairma If Directors or Office If Florida General I Signature of one Gen	an, Vice Chairman, Dire ers have not been selecte Partnership or Limited peral Partner.	d, an Incorporator must sign.  Liability Partnership:
Signature of Chairma If Directors or Office If Florida General I Signature of one Gen	an, Vice Chairman, Dire ers have not been selecte Partnership or Limited neral Partner. Partnership or Limited	d, an Incorporator must sign.
Signature of Chairman If Directors or Office  If Florida General I Signature of one General I Florida Limited I Signatures of ALL (	an, Vice Chairman, Dire ers have not been selecte Partnership or Limited neral Partner. Partnership or Limited	d, an Incorporator must sign.  Liability Partnership:
Signature of Chairma If Directors or Office If Florida General I Signature of one General If Florida Limited I	an, Vice Chairman, Dire ers have not been selecte Partnership or Limited heral Partner. Partnership or Limited General Partners.	d, an Incorporator must sign.  Liability Partnership:
Signature of Chairman If Directors or Office  If Florida General I Signature of one General I Florida Limited I Signatures of ALL (All others:	an, Vice Chairman, Dire ers have not been selecte Partnership or Limited heral Partner. Partnership or Limited General Partners.	d, an Incorporator must sign.  Liability Partnership:
Signature of Chairman If Directors or Office If Florida General I Signature of one General Isignatures of ALL (All others: Signature of an authorizes:	an, Vice Chairman, Directors have not been selected Partnership or Limited peral Partner.  Partnership or Limited General Partnership or Limited General Partners.  orized person.	d, an Incorporator must sign.  Liability Partnership:  Liability Limited Partnership:
Signature of Chairman If Directors or Office If Florida General I Signature of one General I Signature of ALL CAll others: Signature of an authorized:  Articles of C	an, Vice Chairman, Directors have not been selected Partnership or Limited peral Partner.  Partnership or Limited General Partnership or Limited General Partners.  Orized person.	d, an Incorporator must sign.  Liability Partnership:  Liability Limited Partnership:  \$25.00
Signature of Chairman If Directors or Office If Florida General I Signature of one Ger If Florida Limited I Signatures of ALL CAll others: Signature of an authorizes:  Articles of C	an, Vice Chairman, Directors have not been selected Partnership or Limited neral Partner.  Partnership or Limited General Partnership or Limited General Partners.  Orized person.  Conversion:  orida Articles of Organizations	d, an Incorporator must sign.  Liability Partnership:  Liability Limited Partnership:  \$25.00

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	in			
The name of the Elimited Elability Company	18;			
Oasis Outsourcing Admin Group, LLC				
(Must contain the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	<del></del>		
ARTICLE II - Address:				
The mailing address and street address of the	principal office of the Limited L	iability Cor	npany i	s:
Principal Office Address:	Mailing Address:			
911 Panorama Trail South	911 Panorama Trail South			
Rochester, NY 14625	Rochester, NY 14625			
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own Re business entity with an active Florida registration.)  The name and the Florida street address of the  Cogency Global Inc.	egistered Agent. You must designate an indiv	s Signatur vidual or anothe	ë ±	77 (F) 2-1 2-1
Nε	ame			·· .
Tallahassee	P.O. Box NOT acceptable) FL 32301	; F:	AH 10: 27	,,,,
City	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.

Menitt Walker, ASSI. Secret and 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:

John Gibson
911 Panorama Trail South
Rochester, NŸ 14625
Qasis Qutsourcing, Inc.
911 Panorama Trail South
Rochester, NY 14625
112010404111111111111111111111111111111
_
authorized representative of a member h sgetton 605.0203 (1) (b), Florida Statutes. I am aware that

Robert Schrader, Treasurer of Oasis Outsourcing, Inc.

as provided for in s.817.155, F.S.

Typed or printed name of signce

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)