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(Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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T. SCOTT



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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 10, 2020

:

WINSTON WEILHHEIMER IN HOME TAX SERVICES INC 206 S SPRING GARDEN AVE DELAND, FL 32720

SUBJECT: GMD OF DELAND LLC Ref. Number: W20000013408

We have received your document for GMD OF DELAND LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return the corrected original and one copy of 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.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 120A00002926

## COVER LETTER

TO: New Filing Section Division of Corporations

# SUBJECT: GMD OF DELAND 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:

WINSTON WEILHEIMER

(Contact Person)

IN HOME TAX SERVICE INC

(Firm/Company)

206 S SPRING GARDEN AVE

(Address)

DELAND FL 32720

(City, State and Zip Code)

#### INHOMETAXSERVICE@MSN.COM

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

For further information concerning this matter, please call:

WINSTON WEILHEIMER	at (_386	736 8752
(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)

#### Mailing Address:

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## <u>Articles of Conversion</u> For <u>"Other Business Entity"</u> 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: GMD OF DELAND INC

(Enter Name of Other Business Entity)

 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 12/9/2019

(date of organization, formation or incorporation)

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

GMD OF DELAND LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: 01/01/2020

(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.)

<u>Note:</u> 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 8TH	day of JANUARY	20 20	
		imited Liability Company:	
Signature of Autho Printed Name: <u>GE</u>	rized Representative:		
		<u>y:</u> [See below for required signature(s]	)
Signature: Printed Name: GER/	ALD DITARANTO	Title: PRESIDENT	
Signature:		Title:	
Signature: Printed Name:			
Signature: Printed Name:		Title:	
Signature: Printed Name:		Title:	
Signature: Printed Name:		Title:	
	tion: han, Vice Chairman, Director, hers have not been selected, ar		
If Florida General Signature of one Ge	Partnership or Limited Lia neral Partner.	bility Partnership:	
If Florida Limited Signatures of ALL (	Partnership or Limited Lia General Partners.	bility Limited Partnership:	
All others: Signature of an auth	orized person.		
Fees:			
Articles of 0 Fees for Flo Certified Co Certificate o	orida Articles of Organization	\$25.00 n: \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE 1 - Name:**

The name of the Limited Liability Company is:

#### GMD OF DELAND LLC

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

#### **ARTICLE II - Address:**

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

Principal Office Address:	Mailing Address:
2200 N WOODLAND BLVD	2200 N WOODLAND BLVD
DELAND FL 32720	DELAND FL 32720

## 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

(The Limited Liability Company cannot serve as its own registered Agent. For most designate ar individubusiness entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

GERALD DITARANTO

Name

2200 N WOODLAND BLVD

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

DELANDFL32720CityZip

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)

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#### ARTICLE IV-

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

"AMBR" = Authorized Member	
"MGR" = Manager AMBR	GERALD DITARANTO
(Use attachment if necessary)	

**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.

GERALD DITARANTO

Typed or printed name of signee Fiting 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)