L21000328510

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Busiless Emity Name)
(Document Number)
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DATE:

7/15/2021

NAME: PA TRUE CHOICE, LLC

TYPE OF FILING: DOMESTICATION

COST:

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ACCOUNT: **FCA00000015**

AUTHORIZATION: ABBIE/PAUL HODGE

annie Hodge



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 16, 2021

FLORIDA FILING & SEACHR SERVICES

SUBJECT: PA TRUE CHOICE, LLC

Ref. Number: W21000101457

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

Only non-United States entities may become a domestic limited liability company as stated in section 605.1052, Florida Statutes. You may want to explore one of the conversion options. Please return to our website sunbiz.org to download the appropriate form.

Please return 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.

Neysa Culligan Regulatory Specialist III

Letter Number: 821A00016451

Keep original file dete Thank you!

SECRETA OF STATE

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: PA True Choice, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
First organized, formed or incorporated under the laws of
2/20/2018
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
PA True Choice, 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.
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 t is 8th	_ day of July	20_21
Signature of Author	ized Representative of Limi	ited Liability Company:
City of the contract of the co	ed Representative: Bun	B
Signature of Authoriz	arger	Title: Authorized Member
Printed Name, Didde D	arger	Title, Mailonzea Mailon
		[See below for required signature(s)]
Signature: B	Den	Title: Authorized Member
Printed Name Bruce B	arger	Title: Authorized Member
rimed rame.	<u> </u>	
Signature:		
Printed Name:		Title:
Signature:		
Printed Name:		Title:
Signature:		Title:
Printed Name:		Title:
G:		
Signature:		Tid
Printed Name:	.	Title:
Cianatura		
Printed Name:		Title:
Trimed Name	-,-,-	Title.
If Florida Corporation	on:	
	n, Vice Chairman, Director, or	Officer.
	s have not been selected, an In	
	,	, -
	<u>ırtnership or Limited Liabili</u>	ty Partnership:
Signature of one Gene	ral Partner.	
· · · · · · · · · · · · · · · · · · ·	<u>irtnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of <u>ALL</u> Ge	neral Partners.	
All others:	:a	
Signature of an author	ized person.	
Fees:		
Articles of Co	inversion:	\$25.00
	da Articles of Organization:	\$125.00
Certified Cop	-	\$30.00 (Optional)
Certificate of		\$5.00 (Optional)
Certificate of	giaius.	aa.oo (Opaonar)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:			
PA True Choice, LLC			
(Must contain the words "Limited Liability Co	mpany, "L. L.C.," 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:		
357 S. Roscoe Bivd.	357 S. Roscoe Blvd.		
Ponte Verde Beach, FL 32082	Ponte Verde Beach, FL 32082	7. 0.83	2921 JUL
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its own Registere business entity with an active Florida registration.)	d Agent. You must designate an individual or another		15 AH
The name and the Florida street address of the register	ed agent are:	卫军	9: 08
Bruce Barger		Li,	(4)
Name	E		
357 S. Roscoe Blvd.			
Florida street address (P.	O. Box NOT acceptable)		
Ponte Verde Beach	FL 32082		
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, an 1 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

(CONTINUED)

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager AMBR	Bruce Barger	
	357 S. Roscoe Blvd.	
	Ponte Verde Beach, FL 32082	
AMBR	Brianna Barger	
	357 S. Roscoe Blvd.	Ø)
	Ponte Verde Beach, FL 32082	TALI TALI
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		STATE OF THE STATE
		Li,
(Use attachment if necessary)	0	
CLE V: Effective date, if other than the effective date is listed, the date must be after the date of filing.)	e date of filing: $\frac{1}{2021}$. (OPTIONAL e specific and cannot be more than five business days price	
CLE VI: Other provisions, if any.		
		
S	S	

ARTICLE IV-

that the facts stated herein are true. 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 a 817.155, F.S.)

Bruce Barger, Authorized Member 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 (Option \$ 5.00 Certificate of Status (Optional)