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PICK-UP	☐ WAIT	MAIL
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(D	ocument Number)	
Certified Copies	Certificates	of Status
		
Special Instructions to	Filing Officer:	

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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 11/02/2021	-				⇔WALK IN**
ENTITY NAME ATHE	RTON GALARDI MU	JLLEN & RE	EDER, PLLC	;	
DOCUMENT NUMBER_					
	PLEASE FILE TH	HE ATTACHED	AND RETUR	W	
	Plain Copy				
<u>xxxx</u>	Certified Copy Certificate of Status				
/	PLEASE OBTAIN THE P	FOLLOWING FO	R THE ABOVL	ENTITY	
	Certified Copy of Arts	is & Amendments			
	Certificate of Good St	tanding			
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TOTAL OWED \$ 180.0	0	ļ.		: 120160000072	2
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Please call Tina at ti	be above number for	any issues o	r concerns,	Thank you so	much!

COVER LETTER

TO: New Filing Sec Division of Cor				
SUBJECT: ATHERTO	N GALARDI MULLEN	& REEDER PLL		
SUBJECT:	(Name of Resu	ıltıng Florida Limi	ted Com	pany)
The enclosed Articles of Business Entity" into a	of Conversion, Articl "Florida Limited Lie	es of Organizat ability Compan	ion, and y``in ac	d fees are submitted to convert an "Othe cordance with s. 605.1045, F.S.
Please return all corres	pondence concerning	this matter to:		
Andrew R. Comiter, Esq	,		_	
<u> </u>	(Contact Person)			
Comiter, Singer, Basema	an & Braun, LLP			
	(Firm/Company)		_	
3825 PGA Boulevard, Sc	uite 701			
	(Address)	<u> </u>	_	
Palm Beach Gardens, F	L 33410			
(Cir	ty, State and Zip Code)		_	
corporate@comitersinge	er.com			
E-mail Address: (to be	used for future annual rep	port notifications)	-	
For further information	n concerning this mat	ter, please call:		
Andrew R. Comiter, Esq	J.	_at (<u></u>	626-2	2101
(Name of Contact	Person)	(Area Code	(Day	time Telephone Number)
Enclosed is a check fo dollars and drawn on a	r the following amou bank located in the	nt: (All checks United States)	process	sed by this office must be payable in US
(***	□\$155.00 Filing Fees and Certificate of Status	■\$180.00 Filin and Certified Co	_	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address New Filing Second Division of Co P.O. Box 6327 Tallahassee, Fl	ction rporations		New Divis	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

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: ATHERTON GALARDI MULLEN & REEDER P.A.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a corporation P200041432 (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
(Enter state, or if a non-U.S. entity, the name of the country)
May 2, 2012 On (date of organization, formation or incorporation)
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
ATHERTON GALARDI MULLEN & REEDER PLLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: November 2, 2021
(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.



Signature of Authorized Representative of Lin	Hea Daonity Company:
Signature of Authorized Representative:	
Printed Name: Scott W. Atherton	Title: Manager
Timed Tame.	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)
11	
Signature:	Tid Brooident
Printed Name: Scott W. Atherton	Title: President
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	The state of the s
Printed Name:	itle:
Signature:	
Printed Name:	Title:
Signature: Printed Name:	Tiste
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, o	r Officer.
If Directors or Officers have not been selected, an I	ncorporator must sign.
If Florida General Partnership or Limited Liab	nty Partnersulp:
Signature of one General Partner.	
ū	lity Limited Partnership:
If Florida Limited Partnership or Limited Liabi	lity Limited Partnership:
J	lity Limited Partnership:
If Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners. All others:	lity Limited Partnership:
If Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners.	lity Limited Partnership:
If Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners. All others:	lity Limited Partnership:
If Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	lity Limited Partnership: \$25.00
If Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners. All others: Signature of an authorized person. Fees: Articles of Conversion:	\$25.00
If Florida Limited Partnership or Limited Liabi Signatures of ALL General Partners. All others: Signature of an authorized person. Fees:	\$25.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	s:	
ATHERTON GALARDI MULLEN & REEDER PLI	_C	
(Must contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.	")
ARTICLE II - Address: The mailing address and street address of the	principal office of the Lin	nited Liability Company is:
Principal Office Address:	Mailing Address:	
224 Datura Street	224 Datura Street	
Suite 815	Suite 815	00401
West Palm Beach, FL 33401	West Palm Beach, FL	33401
The name and the Florida street address of the Scott W. Atherton Na	ime	_
224 Datura Street, Suite 8		_
Florida street address (I	P.O. Box NOT acceptable)	1
West Palm Beach	FL 33401	
City	Zip	
Having been named as registered agent an liability company at the place designate registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as Registered Agent's S	d in this certificate, I hereb pacity. I further agree to co see performance of my dutie	y accept the appointment as omply with the provisions of all es, and I am familiar with and
	(INUED)	2021 NOV

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Lauren Sokol Atherton
	224 Datura Street, Suite 815
	West Palm Beach, FL 33401
MGR	Scott W. Atherton
	224 Datura Street, Suite 815
	West Palm Beach, FL 33401
711 44 1 4 15 AM AM	
(Use attachment if necessary)	
(Use attachment if necessary)	
LE V: Other provisions, if any.	ed liability company is to engage
LE V: Other provisions, if any.	ed lingility company is to engage
LEV: Other provisions, if any.	ed liability company 13 to engage
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LE V: Other provisions, if any.	ed liability company is to engage
LE V: Other provisions, if any. purpose of this limite e practice of law.	ed hability company is to engage
LE V: Other provisions, if any. PURPOSE OF This limite PREQUIRED SIGNATURE:	
LE V: Other provisions, if any. PURPOSE OF This limite PREQUIRED SIGNATURE: Signature of a member of This document is executed in accordant.	or an authorized representative of a member ce with section 605.0203 (1) (b), Florida Statutes. I am aware cument to the Department of State constitutes a third degree for

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

ARTICLE IV-

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)

Typed of printed name of signee