21000 477531

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	ne)
(Do	ocument Number)	-
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
W2100014	14369	
W210001	43872	





600373132226

2021 NOY -3 AH II: 06



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088

Date: November	08, 2021	
Name: KEN H	OWELL	
Reference #:	1518533	
Entity Name:	INCEPTO	R BIO FL, LLC
Articles_of_Incorpo	oration/Authorization to	Transact Business
Amendment		
Change of Agent		✓ISSUES? CALL
Reinstatement		KEN:
[Conversion_]		518-213-0738
☐ Merger		
Dissolution/Witho	Irawal	and the second of the second o
Fictitious Name	Irawai	
✓ Other	* PLEASE RETAIN ORIG	SINAL FILE DATE OF 11/3/2021 **
	• •	
Authorized Amount:	\$150.00	
Signature		

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.

The name of the "Other Business Entity" immediately properties. Inceptor Bio FL, LLC	rior to the filing of the Articles of Conversion is:	
(Enter Name of Other Business E	ntity)	
2. The "Other Business Entity" is a	limited liability company	
(Enter entity type. Example: corporation, limited partne	ership, general partnership, common law or business trust, etc.)	
First organized, formed or incorporated under the laws of _		
(Ente	er state, or if a non-U.S. entity, the name of the country)	
October 14, 2021		
(date of organization, formation or incorporation)		
3. The name of the Florida Limited Liability Company as s	et forth in the attached Articles of Organization:	
Inceptor Bio FL, LLC		
(Enter Name of Florida Limited Liability (Company)	
4. If not effective on the date of filing, enter the effective de	ate:	
(The effective date: Cannot be prior to date of receipt or the date this document is filed by the Florida Department Note: If the date inserted in this block does not meet the applicable stated ocument's effective date on the Department of State's records.	nt of State.)	
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		

Signed this 2nd	_ day ofNove	nber 20	21
Signature of Author	ized Representativ	e of Limited l	Liability Company:
	• •	Shailesh M	ainni
Signature of Authoriz Printed Name:	ignature of Authorized Representative:		file: Manager & CEO of Inceptor Bio, LLC (Sole Mer
Signature(s) on beha	If of Other Business	Entity: [See]	below for required signature(s
Signature: w Shail	esh Maingi		
Printed Name:	Shailesh Maingl,	Ti	tie: Manager & CEO of Inceptor Blo, LLC (Solo Mer
Signature:			tle:
rimied ivame			
Signature:			
Printed Name:		Ti	tle:
C '			
Signature:		Ti	itle:
Printed Name:		11	
Signature:			
Printed Name:		Ti	itle:
Signature:		т;	itle:
Printed Name:			HIC.
If Florida Corporation	on:		
Signature of Chairman	n, Vice Chairman, D	rector, or Offic	cer.
If Directors or Officer	s have not been sele	cted, an Incorp-	orator must sign.
		171.1824. D.	
If Florida General P. Signature of one Gene	artnership or Limit	ea Liability Pa	ar thersinb:
Signature of one Gene	stat Fattict.		
If Florida Limited P.	artnership or Limit	ed Liabili <u>ty L</u> i	imited Partnership:
Signatures of AII Co	eneral Partners.		
Signatures of Acta Of			

\$25.00

\$125.00

Articles of Conversion:

Fees for Florida Articles of Organization:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited	d Liability Company i	s:				
	inceptor Bio	FL, LLC				
(Must cont	ain the words "Limited Liabi	lity Company, "	L.L.C.," or "LLC.")		
ARTICLE II - Address The mailing address and		principal off	ice of the Limi	ited Liability Co	ompany	is:
Principal Office Addre	<u> </u>	<u>Mailing</u>	Address:			
1622 NW 5 Gainesville, Flo		9131	Anson Way, Raleigh, NC 2	Suite 110 27615		
ARTICLE III - Registe (The Limited Liability Company business entity with an active I	cannot serve as its own Reg					
The name and the Florid	la street address of the	registered a	gent are:		202	
	COGENCY G	SLOBAL IN	C.	Carlos Asserta	8- AON 1303	
	Nan	ne	* * *	00 z 00 z 00 z	<u> </u>	•••
	115 North Calhot	ın Street, S	uite 4			
Flo	rida street address (P.	O. Box <u>NO</u> 7	acceptable)	`	<u>=</u>	
	Tallahassee	FL	32301	 •	AH 11: 06	
	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..

Men McKeown, Asst. Sec. stered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Inceptor Bio, LLC
	9131 Anson Way, Suite 110
	Raleigh, NC 27615
(Use attachment if necessary)	
CLE V. Other averieing if and	
CLE V: Other provisions, if any.	
REQUIRED SIGNATURE:	
/s/ Shailesh N	Mainai

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 or printed name of signee

Shailesh Maingi

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