17/00515932

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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September 23, 2021

ALAN P SMITH 7777 N WICKHAM RD STE 12 PMB 501 MELBOURNE, FL 32940

SUBJECT: ALAN P. SMITH LCSW PLLC LLC

Ref. Number: W21000114940

We have received your document for ALAN P. SMITH LCSW PLLC LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

If this is a professional LLC then please remove the LLC and keep PLLC. If this is not a PLLC then remove PLLC and keep LLC. Also if this is a PLLC then please add a specific purpose as to why its a PLLC.

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.

Matthew T Moon Regulatory Specialist II Supervisor

Letter Number: 121A00023070

PILED 2021 NOV -1 PM 1:23 SLOWE WAY OF STATE TALLAHASSEE FLORING

www.sunbiz.org



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 20, 2021

ALAN P SMITH 7777 N WICKHAM RD STE 12 PMB 501 MELBOURNE, FL 32940

SUBJECT: ALAN P. SMITH LCSW PLLC LLC

Ref. Number: W21000114940

We have received your document for ALAN P. SMITH LCSW PLLC 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):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

James G Harris Regulatory Specialist II

Letter Number: 221A00019979

COVER LETTER

Division of C							
SUBJECT: ALAN P.	SMITH LCSW PLLC						
SUBJECT.		sulting Florida Limi	ted Compa	any)	_		
	s of Conversion, Artic a "Florida Limited Li					n "Oth	er
Please return all corre	espondence concerning	g this matter to:					
Alan P. Smith							
	(Contact Person)		_				
ALAN P. SMITH LCSV	V PLLC						
	(Firm/Company)		_				
7777 N. Wickham Rd.	Suite 12 PMB 501						
	(Address)		_				
Melbourne, FL 32940							
((City, State and Zip Code)		_				
alanpsmithlcsw@gmai	l.com						
E-mail Address: (to b	e used for future annual re	port notifications)					
For further information	on concerning this ma	tter, please call:					
Alan P. Smith		_at (³²¹	_\ 757-403	30			
(Name of Conta	ct Person)	(Area Code) (Daytin	ne Telephone Number)			
	or the following amou a bank located in the		processed	d by this office must	be payable	e in US	}
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co	py (□\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
Mailing Add New Filing So Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New Fil Division The Cer 2415 N.	Address: ling Section n of Corporations ntre of Tallahassee . Monroe Street, Suite ssee, FL 32303	S. L.S.	2021 NOV -1 PM 1:24	FILED

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: ALAN P. SMITH LCSW PLLC LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
First organized, formed or incorporated under the laws of
11/21/2014
on (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: ALAN P. SMITH LCSW PLLC
(Enter Name of Florida Limited Liability Company)
 If not effective on the date of filing, enter the effective date:
MH 00000 8431

Signed this 25th day of OCTOBER	_ 20 <u> 21</u>
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Ul Printed Name: Alan I. Sm. th	an l. Sulh Title: OWNER
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signatura: Ala l dith	
Signature: Mar P. Julk Printed Name: Alan P. Smith	Title: OWNER
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:	
Printed Name:	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	corporator must sign.
If Florida General Partnership or Limited Liabilit	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy: Certificate of Status:	\$30.00 (Optional)
Centificate of Status.	\$5.00 (Optional)



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
, , ,	
ALAN P. SMITH LCSW PLLC	
(Must contain the words "Limited Liab	nility Company, "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:
2588 ADDINGTON CIRCLE	7777 NORTH WICKHAM ROAD
ROCKLEDGE, FL 32955	SUITE 12 PMB 501
TOOTILE OE, I'E OZOOO	MELBOURNE, FL 32940
business entity with an active Florida registration.) The name and the Florida street address of the ALAN P. SMITH Na	ne registered agent are:
2588 ADDINGTON CIRCLE	=
	P.O. Box NOT acceptable)
Tiorida street address (1	.0. Dox <u>1101</u> acceptable)
ROCKLEDGE	FL 32955
City	Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and compleaccept the obligations of my position as	d to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all te performance of my duties, and I am familiar with and registered agent as provided for in Chapter 605, F.S

(CONTINUED)



A	D	TI	CI	4	IV_{-}
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The name and address of each person authorized to manage and control the Limited Liability Company:

AMBR ALAN P. SMITH 2588 ADDINGTON CIRCLE ROCKLEDGE, FL 32955 (Use attachment if necessary) LE V: Other provisions, if any. RMING A PLLC BECAUSE I AM PROVIDING PROFESSIONAL SERVICES VIA A MENTAL E PRACTICE. ALL MEMBERS OF THE PLLC ARE LICENSED WITH THE STATE OF FLORIDA	ALAN P. SMITH 2588 ADDINGTON CIRCLE ROCKLEDGE, FL 32955 (Use attachment if necessary) LE V: Other provisions, if any. RMING A PLLC BECAUSE I AM PROVIDING PROFESSIONAL SERVICES VIA A MENTAL PRACTICE. ALL MEMBERS OF THE PLLC ARE LICENSED WITH THE STATE OF FLORIDA 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 the any false information submitted in a document to the Department of State constitutes a third degree felo as provided for in s.817.155, F.S. Typed or printed name of signee Filing Fees \$125.00 Filing Fee for Articles of Organization and Designation of Registered A	<u> Fitle:</u>	Name and Address:
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