

L220000032726

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

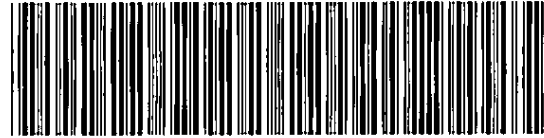
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200379330312

ALLAHABAD, FLORIDA

2022 JAN 27 PM 1:55

2022 JAN 27 AM 8:21

RECEIVED

FILED
SECRETARY OF STATE

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

PLEASE USE FUNDS FROM ACCT: ~~120210000160~~ AMOUNT: \$150.00

AUTHORIZATION SIGNATURE: *[Signature]*
KARIA & PATEL STIRLING HEALTH CENTER, LLC

Business Name

Document Number, (if known):

☐ Walk in ☐ Pick up time ☐
☐ Mail out ☐ Will wait
☐ Photocopy
☐ Certified Copy of Articles of Organization

☐ Certificate of Status

NEW FILINGS

☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other
☐ **CORP**

AMMENDMENTS

☐ Amendment
☐ Resignation of R.A. Officer/Director
☐ Change of Registered Agent
☐ **Dissolution/Withdrawal**
☐ Merger
☒ **Conversion**

OTHER FILINGS

☐ Annual Report
☐ Fictitious Name
☐ APOSTIL () ☐
Country

REGISTRATION/QUALIFICATIONS

☐ Foreign filing
☐ Limited Partnership
☐ Reinstatement
☐ Statement of Revocation of Dissolution
☐ Other

EXAMINER'S INITIALS: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 27, 2022

FLORIDA CAPITAL COURIER

SUBJECT: KARIA & PATEL STIRLING HEALTH CENTER, LLC
Ref. Number: W22000008892

We have received your document for KARIA & PATEL STIRLING HEALTH CENTER, LLC and your check(s) totaling \$. 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), s.607.1622(9) and/or 607.1622(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 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: 722A00002197

2022 JAN 28 PM 3:41
ALBANY
REGISTRATION

COVER LETTER

TO: New Filing Section
Division of Corporations

PLEASE USE ORIGINAL FILE DATE OF 1/27/2022

SUBJECT: KARIA & PATEL STIRLING HEALTH CENTER, 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:

Eric Kuper

(Contact Person)

Perlman, Bajandas, Yevoli & Albright, P.L.

(Firm/Company)

200 S. Andrews Ave., Ste 600

(Address)

Fort Lauderdale, FL 33301

(City, State and Zip Code)

ekuper@pbyalaw.com

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

For further information concerning this matter, please call:

Eric Kuper at (954) 566-7117
(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)

<input checked="" type="checkbox"/> \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	<input type="checkbox"/> \$155.00 Filing Fees and Certificate of Status	<input type="checkbox"/> \$180.00 Filing Fees and Certified Copy	<input type="checkbox"/> \$185.00 Filing Fees, Certified Copy, and Certificate of Status
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Mailing Address:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Conversion
For
"Other Business Entity"
Into
Florida Limited Liability Company

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2022 JAN 27 AM 8:21

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:
KARIA & PATEL STIRLING HEALTH CENTER, P.A.

(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.)

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 1/21/1985
(date of organization, formation or incorporation)

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

KARIA & PATEL STIRLING HEALTH CENTER, 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 this 26 day of January 2022

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: Kishor Karia
Printed Name: Kishor Karia, M.D. Title: Authorized Representative

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: Kishor Karia
Printed Name: Kishor Karia, M.D. Title: President

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.
If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

**ARTICLES OF ORGANIZATION
OF
KARIA & PATEL STIRLING HEALTH CENTER, LLC
(a Florida limited liability company)**

The undersigned, for the purpose of forming a Florida limited liability company under the Florida Revised Limited Liability Act, Chapter 605 of the Florida Statutes, hereby adopts, makes, signs and delivers these Articles of Organization:

**ARTICLE I
NAME**

The name of the limited liability company is KARIA & PATEL STIRLING HEALTH CENTER, LLC (the "Company").

**ARTICLE II
MAILING AND PRINCIPAL OFFICE ADDRESS**

The mailing address of the Company is: 4330 Sheridan Street, Suite 201B, Hollywood, FL 33021. The principal office address of the Company is 4330 Sheridan Street, Suite 201B, Hollywood, FL 33021.

**ARTICLE III
REGISTERED AGENT AND REGISTERED OFFICE**

The name and address of the Company's initial registered agent and registered office are:

Steve Leykind
4330 Sheridan Street, Suite 201B
Hollywood, FL 33021

**ARTICLE IV
MANAGEMENT**

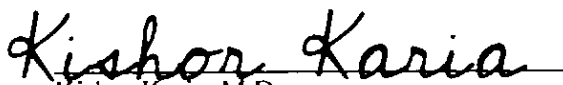
The Company shall be manager-managed. The initial Manager shall be:

Steve Leykind
4330 Sheridan Street, Suite 201B
Hollywood, FL 33021

**ARTICLE V
PURPOSE**

The purpose for which the Company is organized is any and all lawful business.

The undersigned has executed these Articles of Organization as of January 26, 2022.


Kishor Karia, M.D.
Authorized Representative

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**CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT AND REGISTERED OFFICE**

Pursuant to the provisions of Section 605.0113, Florida Statutes, the undersigned submits the following statement in designating the registered agent and registered office in the State of Florida:

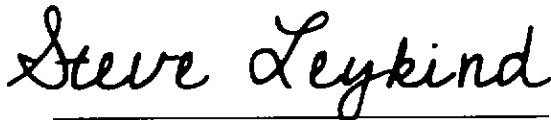
The name of the corporation is KARIA & PATEL STIRLING HEALTH CENTER, LLC (the "Company").

The Registered Agent and Registered Office of the Company are:

Steve Leykind
4330 Sheridan Street, Suite 201B
Hollywood, FL 33021

Having been named as Registered Agent and to accept service of process for the Company at the place designated in this Certificate, I hereby accept the appointment as Registered Agent and agree to act in such 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.

Dated: January 26, 2022.



Steve Leykind

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