L22000251785

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000389041320

BECHETTARY OF STATE

RECEIVED



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	06/07/2022				
	Merritt Wa	lker	_		
	1706				
	DISCOV		OME GUL	COAST	, INC
✓ Article	es of Incorporation.	/Authorization	to Transact B	Business	
Amer	adment				
☐ Chan	ge of Agent				
Reins	tatement				
✓ Conve	ersion				
☐ Merge	er er				
☐ Disso	lution/Withdrawal				
Fictition	ous Name				
Other					
Authorized A	.mount:	\$150			
Signature:		un			

F: 800.944.6607

F: +852.2682.9790

COVER LETTER

Division of C	lorporations				
SUBJECT, DISCOV	ERY AT HOME GULF O	COAST LLC			
SOBJECT:	(Name of Re-	sulting Florida Lir	nited Cor	npany)	
				d fees are submitted to convert an "Othe coordance with s. 605,1045, F.S.	
Please return all corr	espondence concernin	g this matter to	:		
Amy Dean					
	(Contact Person)				
Meltzer Purtill & Stel	le, LLC				
	(Firm/Company)	•	_		
1515 Woodfield Rd.,	2nd Floor				
	(Address)	···			
Schaumburg, IL 601	.73				
	City, State and Zip Code)		_		
Adean@mpslaw.con	า				
	se used for future annual re	port notifications)	_		
For further informati	on concerning this ma	tter, please call	:		
Amy Dean		_at (<u>847</u> _) 330	0-2400	
(Name of Cont	(Area Coc	c) (Day	time Telephone Number)		
	for the following amount a bank located in the		proces	sed by this office must be payable in US	
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	CI\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filia and Certified C		☐S185.00 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Address:			Stree	t Address:	
New Filing Section				Filing Section	
Division of C			Division of Corporations		
P.O. Box 632			Centre of Tallahassee N. Monroe Street, Suite 810		
Tallahassee,	PL 32314			hassee, FL 32303	
			. (4)141		

TO: New Filing Section

FILED

2022 JUN -7 PM 1:33

Articles of Conversion For "Other Business Entity" Into

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

SECRETARY OF STATE

Florida Limited Liability Company

Statutes. 1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: DISCOVERY AT HOME GULF COAST, INC (Enter Name of Other Business Entity) 2. The "Other Business Entity" is a _____ (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) SEPTEMBER 3, 2013 (date of organization, formation or incorporation) 3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: DISCOVERY AT HOME GULF COAST 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 31st day of JANUARY	20_22
	Signature of Authorized Representative of Limi	ited Liability Company:
	and the state of t	2400
	Signature of Authorized Representative: Printed Name: JOY S. GOLDMAN	Title: AUTHORIZED REP
	Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
	Signature:	
	Printed Name: THOMAS COSTELLO	Title: CFO
	·	
	Signature:Printed Name:	42.1
	Printed Name:	little:
	Signature:	
	Signature:Printed Name:	Title:
	Signature:Printed Name:	Title
	rimed Name.	THIC.
	Signature:	
	Signature: Printed Name:	Title:
	Signature: Printed Name:	Title
	Timed Panie.	
	If Florida Corporation:	
	Signature of Chairman, Vice Chairman, Director, or	
	If Directors or Officers have not been selected, an In	corporator must sign.
	If Florida General Partnership or Limited Liabili	ty Partnership:
	Signature of one General Partner.	
	If Florida Limited Partnership or Limited Liabili	ty Limited Partnership:
	Signatures of <u>ALL</u> 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 FOR FLORIDA LIMITED LIABILITY COMPANY

-ARTICLE I - Na	me:					
The name of the L	imited Liability Company	is:				
	OME GULF COAST LLC					
(M	ust contain the words "Limited Lin	hility Company	."L.L.C.," or "LL.C.")			
ARTICLE II - A						
The mailing addre	ss and street address of the	principal o	ffice of the Limit	ed Liability Company is:		
		N 7 '4'	4.11			
Principal Office	Vadress:	Mailing Address:				
3461 BONITA BAY	DIVO STE 101	SAME				
BONITA SPRINGS		SAME	<u> </u>			
DOM I A SERINGS	, FL 34134					
-			 			
ADDICE R III - F	Davidson and America Designation	and Ottan	C Danistand to	e.a Cianaeaaaa		
	Registered Agent, Registe Company cannot serve as its own Re					
	active Florida registration.)	Bisietes Albert	rost must designife to			
				202 Տե		
The name and the	Florida street address of the	ne registered	agent are:	1 2 .		
CORPORATION SERVICE COMPANY				2 i	مهري	
Name			多型 コ	1		
				N-7 PH		
1201 HAYS STREET			militar 🝱	صحنانا		
Florida street address (P.O. Box <u>NOT</u> acceptable)			151eu			
	TALLAHASSEE		32301	2022 JUN -7 PH 1:33 SEURCHART UT STATE TALLAHASSEE, FL		
		FI,				
	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..

Melissa Clarke, Melissa Clarke, Asst. V.P. Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
PRESIDENT	DAN CUNDIFF		
	3461 BONITA BAY BLVD., STE. 101	-	
	BONITA SPRINGS, FL 34134	- -	
CEO	RICHARD J. HUTCHINSON		
	3461 BONITA BAY BLVD., STE. 101	•	
	BONITA SPRINGS, FL 34134	<i>-</i> -	
CFO	THOMAS COSTELLO		
 	3461 BONITA BAY BLVD., STE. 101	-	
	BONITA SPRINGS, FL 34134	-	
		-	
		<u>.</u>	
(Use attachment if necessary)	SECK TAL	2022 JUN -7	eccipal)
		Ē	n
ARTICLE V: Other provisions, if any.	HAS	1	
	U) C	7	
	<u></u>	·	
REQUIRED SIGNATURE:		ဋ	
REQUIRED SIGNATURE:	· ·		

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 that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

JOY S. GOLDMAN

ped 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 (Optional)