122060315861

(Requestor's Name)
(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:
1
}
}
}

Office Use Only



700390557397

97/07/22--01003--012 **155.00

SLURETARY OF STATE
SLURETARY OF STATE

JUL -7 PM 4:55

D. O'KEEFE



ROBERT H. MONTGOMERY, III, ESQUIRE, P.C.

230 SOUTH BROAD STREET SUITE 305 PHILADELPHIA, PA 19102

Phone (215) 731-1404 Fax (215) 701-1861 www.YourDentalLawyer.com

Robert H. Montgomery, III *

Anna M. Haslinsky

April V. Francia &

Joshua R. Salzer ‡

Kimberly Rest Montgomery, of counsel †

Margaret E. Bowles, of counsel a

Ronald M. Neifield, of counsel

Except as noted below, members of the Pennsylvania & New Jersey Bars

- * Also member of Texas, Arizona, Georgia, Idaho, Maryland, Michigan, Minnesota, Missouri, New York, Ohio, Oklahoma, Oregon, Utah, Virginia, Washington & Wisconsin Bars
- A Member of Pennsylvania Bar, only
- † Also member of District of Columbia Bar-
- ^a Member of Colorado, Connecticut, Florida, Massachusetts & North Carolina Bars, only

Member of Delaware Bar, only

Sender's E-mail: April@RMontgomery-Law.com

July 6, 2022

Via FedEx

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

Re: Articles of Conversion and Articles of Organization Ideal Practices I LLC

Dear Sir/Madam:

Please find enclosed for filing the Articles of Conversion and Articles of Organization to be filed on behalf of "Ideal Practices I LLC" for the purpose of converting this existing Pennsylvania limited liability company into a Florida limited liability company. Also enclosed is a check made payable to the "Florida Department of State" in the amount of \$155.00 (\$125.00 base filing fee for Articles of Organization, plus \$25.00 base filing fee for Articles of Conversion, plus \$5.00 Certificate of Status fee). Please reach out to me directly with any questions. Thank you.

April V Francia

COVER LETTER

TO: New Filin	g Section of Corporations			
	AL PRACTICES I LLC			
SUBJECT: 100		sulting Florida Limite	ited Company)	
Business Entity" i		iability Company	ion, and fees are submitted to convert a y" in accordance with s. 605.1045, F.S.	n "Other
APRIL FRANCIA E	·			
	(Contact Person)		_	
ROBERT H MONT	rgomery, III, esq. pc			
	(Firm/Company)		_	
230 S BROAD ST				
230 3 BROAD 31			-	
	(Address)			
PHILADELPHIA, P	<u> </u>		_	
	(City, State and Zip Code)			
	OMERY-LAW.COM		_	
E-mail Address: (to be used for future annual re	port notifications)		
For further inform	nation concerning this ma	tter, please call:		
APRIL FRANCIA E	SQ.	_at (,7311404 X. 6	
(Name of Co	ontact Person)	(Area Code)) (Daytime Telephone Number)	
	ck for the following amou on a bank located in the		processed by this office must be payable	in US
☐ \$150.00 Filing Fee (\$25 for Conversion & \$125 for Articles of Organization)	es S155.00 Filing Fees and Certificate of Status	□\$180.00 Filing I and Certified Copy		
Mailing A New Filing Division o P.O. Box 6	g Section f Corporations	1	Street Address: New Filing Section Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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: IDEAL PRACTICES LLC
(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 PENNSYLVANIA
(Enter state, or if a non-U.S. entity, the name of the country)
on DECEMBER 22, 2014
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
IDEAL PRACTICES I 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.

FILED
2022 JUL-7 PM 4: 55

Signed this 6th day of July	20_22				
Signature of Authorized Representative of Limited Liability Company:					
Signature of Authorized Representative: STEPHEN TRUTTER	Title: AUTHORIZED MEMBER				
Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]					
Signature: Mark Control of the Contr	Title: AUTHORIZED MEMBER				
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: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)				

FILED

2022 JUL-7 PM 4: 55

SECRETARY OF STATE
TALLAHASSIT, FLORRIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	IDEAL PRA	CTICES I LLC	•
(Must contai	n the words "Limited Liab	oility Company	, "LL.C.," or "LLC.")
RTICLE II - Address: te mailing address and street add	lress of the principal offic	e of the Limite	d Liability Company is:
<u>Principal</u>	Principal Office Address:		Mailing Address:
7901 4TH ST N STE 3	7901 4TH ST N STE 300)1 4TH ST N STE 300
ST. PETERSBURG, FL 33702			
TICLE III - Registered Agen the Limited Liability Company c	L 33702 t, Registered Office, & Rannot serve as its own Reg		PETERSBURG, FL 33702 ent's Signature:
RTICLE III - Registered Agen the Limited Liability Company co tother business entity with an ac	t, Registered Office, & Fannot serve as its own Regitive Florida registration.)	tegistered Agent.	PETERSBURG, FL 33702 ent's Signature:
RTICLE III - Registered Agen the Limited Liability Company co tother business entity with an ac	t, Registered Office, & Fannot serve as its own Registered Florida registration.) Idress of the registered age	tegistered Age gistered Agent ent are:	PETERSBURG, FL 33702 ent's Signature:
ST. PETERSBURG, F RTICLE III - Registered Agen the Limited Liability Company c other business entity with an ac the name and the Florida street ad	t, Registered Office, & Fannot serve as its own Registered Florida registration.) Idress of the registered age	tegistered Agent.	PETERSBURG, FL 33702 ent's Signature:
RTICLE III - Registered Agen he Limited Liability Company c other business entity with an ac	t, Registered Office, & Fannot serve as its own Registered Florida registration.) Idress of the registered age	tegistered Agent. gistered Agent. ent are: S INC.	PETERSBURG, FL 33702 ent's Signature:
RTICLE III - Registered Agen he Limited Liability Company c other business entity with an ac	t, Registered Office, & Fannot serve as its own Regitive Florida registration.) dress of the registered age REGISTERED AGENT	tegistered Agent. gistered Agent. ent are: S INC. ame	PETERSBURG, FL 33702 ent's Signature: You must designate an individu
RTICLE III - Registered Agen he Limited Liability Company c other business entity with an ac	t, Registered Office, & Fannot serve as its own Registered Florida registration.) dress of the registered age REGISTERED AGENTS No.	tegistered Agent. gistered Agent. ent are: S INC. ame	PETERSBURG, FL 33702 ent's Signature: You must designate an individu

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

SELIKL JAKE OF STAIL

ARTICLE IV-

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

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager AMBR	STEPHEN TRUTTER	
	7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702	
		
		
		
		200
(Use attachment if necessary)		PALLAHASS
ARTICLE V: Other provisions, if any.		He P
		TS -
REQUIRED SIGNATURE:		07 D

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.

STEPHEN TRUTTER; AUTHORIZED MEMBER

Typed 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)