# L22000458404

(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:

Office Use Only



500396232075

S. CHATHAM UCT 26 2022

DIVISION OF CONTROLLING

22 OCT 26 AM 9:

RECEIVED

## **CT CORP**

## 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

10/26/2022

D	ate:	10/26/2022	- wil DW
		Acc#I20160000072	4. ( ) = V
Name:	MEDIOPIN	I, INC.	
Document #:			
Order #:	14606454		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Availability  Document Examiner Updater Verifier W.P. Verifier	Certified Plain: COGS:		
Ref#	]		

Thank you!

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 followings:
"Other Business Entity" into a Florida Limited Liability Company in accordance with a 605-1045. Florida "Other Business Entity" into a Florida Limited Liability Company in accordance with a 605-1045. Florida "Other Business Entity" into a Florida Limited Liability Company in accordance with a 605-1045. Florida "Other Business Entity" into a Florida Limited Liability Company in accordance with a 605-1045. Florida Limited Liability Company in accordance with a 605-1045. "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: MEDIOPIN, INC.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Corporation  (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)
January 4, 2016
January 4, 2016 on
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: MediOpin, 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 25th day of October 20 22 .

Signature of Authorized Representative of Limit	
DocuSigned by	
Signature of Authorized Representative: Tweer St	tik
Signature of Authorized Representative: Tucker St.  Printed Name: Tucker Stein	Title: Manager
Signature(s) on behalf of Other Business Entity:  S	
Signature: Tucker Stein	
Printed Name: Tucker Stein	Title: Director
Trined (vanie, room, etc.)	Title: Sweeter
Cianature:	
Signature:Printed Name:	Title
rimed Name.	_ Title
C:	
Signature:	ero. 1
Printed Name:	_ 1 itle:
Signature:Printed Name:	<del>- :</del>
Printed Name:	_ Title:
Signature: Printed Name:	
Printed Name:	_ Title:
Signature:	
Printed Name:	_ Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Clif Directors or Officers have not been selected, an Incompared to the Corporation of Chairman, Director, or Clif Directors or Officers have not been selected.	
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	y Limited Partnership:
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)

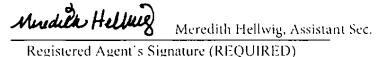


## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

MediOpin, LLC	the words "Limited Light!	ity Company, "L.L.C.," or "LLC.")		
(Stast contain	the words. Emilied Claim	ny Company, Tataon, or Trice, y		
ARTICLE II - Address:				
The mailing address and st	reet address of the p	orincipal office of the Limited Liability C	lompa	ny is:
Principal Office Address	<u>:</u>	Mailing Address:		
860 Johnson Ferry Road NE	. #140-390	860 Johnson Ferry Road NE, #140-390		
Atlanta, Georgia 30342	·	Atlanta, Georgia 30342	•	
		ed Office, & Registered Agent's Signat		<u>P</u>
	nnot serve as its own Regi	ed Office, & Registered Agent's Signat istered Agent. You must designate an individual or and	other	NOISIAID 3+35\$
(The Limited Liability Company ca	nnot serve as its own Regi ida registration.)	istered Agent. You must designate an individual or and		O JO NOISIAID
(The Limited Liability Company ca business entity with an active Flor	nnot serve as its own Regi ida registration.)	istered Agent. You must designate an individual or and	BCT 26	2.50 - 10 NOISIAID 36.254134043
(The Limited Liability Company ca business entity with an active Flor	nnot serve as its own Regi ida registration.)	registered agent. You must designate an individual or and registered agent are:  CT CORPORATION SYSTEM	BCT 26	19854-50-40 NOISIAID 1985-60 Xev13+03+8
(The Limited Liability Company or business entity with an active Flor The name and the Florida	nnot serve as its own Regitida registration.) street address of the Nan	registered agent. You must designate an individual or and registered agent are:  CT CORPORATION SYSTEM	other BCT 2	DIVISION OF COMPANY OF SOME
(The Limited Liability Company or business entity with an active Flor  The name and the Florida  clo C T	nnot serve as its own Regiida registration.) street address of the Nan Corporation System,	registered agent are:  CT CORPORATION SYSTEM  ne	BCT 26	SPOR OF COLFORNIA
(The Limited Liability Company or business entity with an active Flor  The name and the Florida  c/o C T	nnot serve as its own Regitida registration.) street address of the Nan Corporation System, da street address (P.C.)	registered agent are:  CT CORPORATION SYSTEM  ne  1200 S. Pine Island Road	BCT 26	SECHETARY OF STATE

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..



(CONTINUED)

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

## ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
MGR	Chad Harris		
	c/o New Mountain Capital, L.L.C.		
	1633 Broadway, 48th Fl., NY, NY 10019		
MGR	Tucker Stein		
	c/o New Mountain Capital, L.L.C.		
	1633 Broadway, 48th Fl., NY, NY 10019	<del></del>	
		<u> </u>	
<del></del>		<del></del>	
		<u> </u>	
(Use attachment if necessary)		22 OCT	2
(ose attachment if necessary)		26	<u>-</u>
FICLE V: Other provisions, if any.		AHIO	 
		-	- <u>X</u> -Z:
· · · · · · · · · · · · · · · · · · ·			7
REQUIRED SIGNATURE:			
Gocusigned by			
Tucker Stein			
10082484F70448D			

Tucker Stein

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)