

L23000067203

(Requestor's Name)

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(Business Entity Name)

(Document Number)

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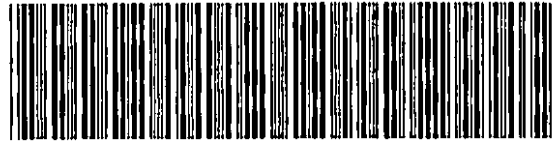
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FEB 13 2023



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02/14/23--01001--004 \*\*21.25

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2023 FEB 13 AM 8:43  
DIVISION OF REVENUE  
TAXPAYER SERVICES  
UNIT

COVER LETTER

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

SUBJECT: Domestication of PHILIP SOCCI, LCSW, LLC to Florida

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	<u>\$ 78.75</u>
Total filing fee	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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From: Barry Miller

Name (printed or typed)

11 N. Summerlin Ave Ste.100

Address

Orlando, Florida 32801

City, State & Zip

(407) 423-1700

Daytime Telephone Number

psocci@gmail.com

E-mail address: (to be used for future annual report notification)

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 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:  
PHILIP SOCCI, LCSW, LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a Sole Proprietorship  
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of Connecticut  
(Enter state, or if a non-U.S. entity, the name of the country)

On 04/21/2021  
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  
PHILIP SOCCI, LCSW, 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.

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DIVISION OF CORPORATIONS  
FALL 2024  
TALLAHASSEE, FLORIDA

2023 FEB 13 AM 8:43

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Signed this 14 day of DECEMBER 2011

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative [Signature]  
Printed Name: PHILIP SOCCI Title: MBR

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

Signature: [Signature]  
Printed Name: Philip Socci Title: MBR

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)

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2023 FEB 13 AM 8:43

CLERK OF COURT  
FRANCHISING  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION**  
**PHILIP SOCCI, LCSW, LLC**  
**A LIMITED LIABILITY COMPANY**

1. **Name.** The name of the limited liability company is PHILIP SOCCI, LCSW, LLC
2. **Purpose.** The purpose of this limited liability company is for licensed clinical social worker practice and any and all lawful business for which limited liability companies may be organized in the state of Florida.

3. **Address of Principle Office.** The address (mailing and street address) of the registered office of the limited liability company is as follows:

MAILING ADDRESS:  
711 Essex Pl  
Orlando, FL 32803

STREET ADDRESS:  
711 Essex Pl  
Orlando, FL 32803

4. **Term.** The term of this LLC shall be perpetual.
5. **Members at Time of Formation.** There will be at least one member at the time the limited liability company is formed.
6. **Period of Duration.** The period of duration shall be perpetual.
7. **Management.** Management of the limited liability company at the time of formation shall be by the Manager(s) whose name and address is as follows:

Philip Socci  
(MGR)

711 Essex Pl  
Orlando, FL 32803

8. **Admission of New Members.** With the written unanimous consent of the members, new members may be admitted into the LLC upon the payment of such capital contribution and upon such terms as the members unanimously decide. In the even that new members are admitted into the LLC, the share of each new member in the profits and losses shall be in such proportion as may be agreed upon between all the members and the new member.
9. **Members Right to Continue Business.** The remaining members of the limited liability company shall have the right to continue business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership

**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of §605.0113, Florida Statutes, the undersigned limited liability company submits the following statement to designate a registered office and registered agent in the state of Florida:

1. **Name.** The name of the limited liability company is PHILIP SOCCI, LCSW, LLC.
2. **Registered Office.** The address of the registered office of the limited liability company is 711 Essex Pl., Orlando, FL 32803.
3. **Registered Agent.** Philip Socci is appointed, and by his signature below accepts appointment, to act as the Registered Agent of PHILIP SOCCI, LCSW, LLC.


*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 provision of all statutes related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my positions as registered agent as provided for in Chapter 605, Florida Statutes.*



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Philip Socci

of a member in the limited liability company as further set forth in the Operating Agreement of the limited liability company.

  
Philip Socci (Aug 29, 2022 09:23 EDT)

Philip Socci

(In accordance with §605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 §817.155, F.S.)