

L23DUU386392

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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WAIT

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MAIL

(Business Entity Name)

(Document Number)

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2023 JUL 17 AM 11:12  
STATE



July 10, 2023

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

*Reference: Caroline De Castro Marcellini PA*

To Whom it may concern:

This Letter is to kindly request the conversion of the Company Caroline De Castro Marcellini PA from a PA to an LLC.

Please see enclosed a copy of the documents below:

- Articles of Conversion Form
- Article of Organization

Shall you need any further information regarding such application, please do not hesitate to contact us.

Sincerely,

Maria C Sousa

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2023 JUL 17 AM 11:12  
CLERK OF THE COURT  
STATE OF FLORIDA

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** CAROLINE DE CASTRO MARCELLINI PA  
(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:

Maria C Sousa Neiva  
(Contact Person)

SA FINANCE & ACCOUNTING INC  
(Firm/Company)

5728 MAJOR BLVD STE 309  
(Address)

ORLANDO, FL 32819  
(City, State and Zip Code)

Licenses@safinacc.com  
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Maria C Sousa Neiva at ( 407 ) 800 7028  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

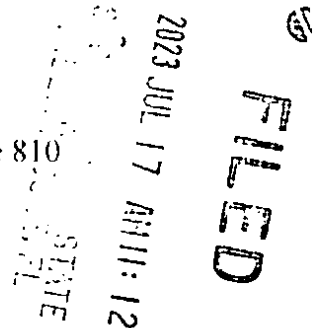
Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

**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**

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:

CAROLINE DE CASTRO MARCELLINI PA

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a Professional Association (P.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 Florida

(Enter state, or if a non-U.S. entity, the name of the country)

on 05/06/2022

(date of organization, formation or incorporation)

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

CAROLINE DE CASTRO MARCELLINI PA

(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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2023 JUL 17 AM 11:12  
FLORIDA DEPARTMENT OF STATE

Signed this 30 day of June 2023

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

Signature of Authorized Representative: [Signature]

Printed Name: CAROLINE DE CASTRO MARCELHINI Title: P

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

Signature: [Signature]  
Printed Name: Caroline de Castro Marcelhini Title: P

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.

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CLERK OF DISTRICT COURT  
STATE OF FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

CAROLINE DE CASTRO MARCELLINI LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

### Principal Office Address:

1037 CELADON ST

WINTER GARDEN, FL 34787

### Mailing Address:

1037 CELADON ST

WINTER GARDEN, FL 34787

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

SA FINANCE & ACCOUNTING INC

Name

5728 MAJOR BLVD STE 309

Florida street address (P.O. Box **NOT** acceptable)

ORLANDO

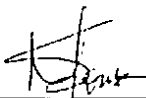
City

FL

32819

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..*



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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CLERK OF DISTRICT COURT  
JULIA M. ASSOCIATES, P.C.