La3000456590

(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:

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S. CHATHAN: OCT -5 1210/04/23--01002--019 **180.00

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Filing Cover Sheet

To: Florida Division of Corporations	
·	
From: Merritt W.	
Date: 10/4/2023	
Trans#: 1412318	
Entity Name: TOMORROWS CH CHILD OF PINELLAS, LLC (FL)	HILD OF PINELLAS, INC. (FL) CONVERTING INTO TOMORROW'S
Articles Incorporation ()	Articles of Amendment ()
Articles of Dissolution ()	Annual Report ()
Conversion (XXX)	Fictitious Name ()
Foreign Qualification ()	Limited Liability ()
Limited Partnership ()	Merger ()
Reinstatement ()	Withdrawal / Cancellation ()
Other ()	
STATE FEES PREPAID WITH CHECK	(<u># 3507</u> FOR <u>\$180</u>
PLEASE RETURN:	
Certified Copy (XXX)	Plain Photocopy ()
Good Standing ()	Certificate of Fact ()

Phone: 855-498-5500



Filing Cover Sheet

HILD OF PINELLAS, INC. (FL) CONVERTING INTO TOMORROW'S
Articles of Amendment ()
Annual Report ()
Fictitious Name ()
Limited Liability ()
Merger ()
Withdrawal / Cancellation ()
(<u># 3507</u> FOR <u>\$180</u>
Plain Photocopy ()
Certificate of Fact ()

Phone: 855-498-5500

COVER LETTER

Division of C				
SUBJECT: TOMORI	ROW'S CHILD OF PINE	LLAS, LLC		
30bare1	(Name of Res	ulting Florida Limite	I Company)
				s are submitted to convert an "Other lance with s. 605.1045, F.S.
Please return all corre	espondence concernin	g this matter to:		
ADAM L. ALPERT, ES	Q.			
	(Contact Person)			
BUSH ROSS, P.A.				
	(Firm/Company)			
1801 N. HIGHLAND A				
	(Address)			
TAMPA, FL 33602				
((City, State and Zip Code)	-		
E-mail Address: (to b	e used for future annual re	port notifications)		
For further information	on concerning this ma	tter, please call:		
BRENDA K. HOLLANI	D, PARALEGAL	_at (813)	224.9255	
(Name of Conta	et Person)	(Area Code)	(Daytime	Telephone Number)
	or the following amou a bank located in the		ocessed by	y this office must be payable in US
□ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing I and Certified Copy	Cer	\$185.00 Filing Fees, tified Copy, and tificate of Status
Mailing Add	ress:	<u>.</u>	treet <u>Ado</u>	lress:
New Filing S	ection		New Filing	
Division of C P.O. Box 632	•			f Corporations e of Tallahassee
1.0.003.032	1		ne centre	or initialiassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

2021 COT -4 PH 1: 06

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: TOMORROWS CHILD OF PINELLAS, 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)
JULY 21, 1994
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: TOMORROWS CHILD OF PINELLAS, 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 4th day of OCTOBER	2023	
Signature of Authorized Representative of Li	imited Liability Company:	
Signature of Authorized Representative:Printed Name: MARK L. ROBINSON	Title: AUTHORIZED REPRESENTATIVE	
Signature(s) on behalf of Other Business Entity	: [See below for required signature(s)]	
Signature: MARK L. ROBINSON	Title: PRESIDENT	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	2023 G
Signature:Printed Name:	Title:	¹⁰²³ CCT -4
Signature:Printed Name:	Title:	PH 1:06
Signature:Printed Name:	Title:	96
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, If Directors or Officers have not been selected, an		
If Florida General Partnership or Limited Lial Signature of one General Partner.	bility Partnership:	
If Florida Limited Partnership or Limited Liab Signatures of <u>ALL</u> General Partners.	bility Limited Partnership:	
All others: Signature of an authorized person.		
Fees:		
	ene 00	

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 - Name: The name of the Limited Liability Company is:	
TOMORROW'S CHILD OF PINELLAS, LLC (Must contain the words "Limited Liability (Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	
Principal Office Address:	Mailing Address:
2669 MCMULLEN BOOTH ROAD CLEARWATER. FL 33761 ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registered address of the registered address.	ed Agent. You must designate an individual or another
MARK L. ROBINSON	
Name	
303 PENNSYLVANIA AVE. Florida street address (P.O. 1	Box NOT acceptable)
PALM HARBOR	FL 34683
City	Zip
Having been named as registered agent and to	accept service of process for the above stated limited

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)

Α	RT	ICI	I II	W
-	R I		Lar.	1 7 -

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

"AMBR" = Authorized Member	
"MGR" = Manager AMBR	SAFETY HARBOR HOLDINGS, INC.
	2669 MCMULLEN BOOTH ROAD
	CLEARWATER, FL 33761
(Use attachment if necessary)	
(Ose attachment if necessary)	
	:
LE V: Other provisions, if any.	
<u> </u>	
REQUIRED SIGNATURE:	4
1001	

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.

MARK L. ROBINSON, AUTHORIZED REPRESENTATIVE

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)