

L23000498438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

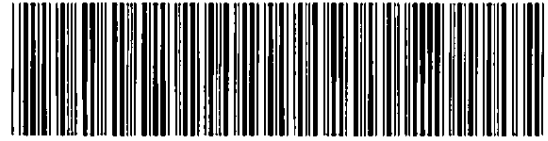
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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SECRET
11/03/23

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2023 OCT 23 PM 1:54
SECRETARY OF STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 28, 2023

LINKED RADS, LLC
7451 MONTE VERDE LANE
WEST PALM BEACH, FL 33412 US

SUBJECT: LINKED RADS, LLC
Ref. Number: W23000132837

We have received your document for and your check(s) totaling \$128.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Only non-United States entities may become a domestic limited liability company as stated in section 605.1052, Florida Statutes. You may want to explore one of the conversion options. Please return to our website sunbiz.org to download the appropriate form.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham
Regulatory Specialist III
Director's Office

Letter Number: 323A00022465

2023 OCT 23 PM 1:08
CORPORATIONS
DIVISION

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

GREGORY G. KEANE#
ATTORNEY AT LAW
FLORIDA BAR BOARD CERTIFIED
TAX ATTORNEY
FLORIDA BAR BOARD CERTIFIED
WILLS, TRUSTS
AND ESTATES ATTORNEY
CERTIFIED PUBLIC ACCOUNTANT

STEPHEN A. PINNACOLI-
ATTORNEY AT LAW

#Of Counsel
- Admitted in PA and FL

THE LAW OFFICES OF
KEANE THOMAS & PINNACOLI

ATTORNEYS AND COUNSELORS AT LAW
789 SW FEDERAL HIGHWAY, SUITE 310
STUART, FLORIDA 34994
TEL. (772) 288-0000 - FAX (772) 221-9028

DOUGLAS P. THOMAS*
ATTORNEY AT LAW
OF COUNSEL

* Admitted in PA Only

October 18, 2023

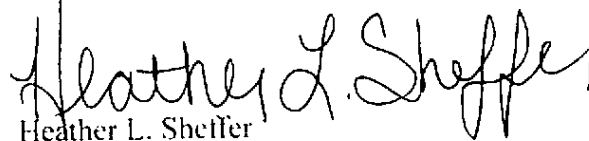
Florida Department of State
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Linked Rads, LLC

To Whom It May Concern:

In connection with the letter that we received from you dated September 28, 2023, please find the paperwork and check that are required to be sent in to you. If you have any questions, please contact me. Thank you.

Sincerely,



Heather L. Sheffer
Assistant to Stephen A. Pinnacoli

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Linked Rads, LLC

(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:

Stephen A. Pinnacoli, Esq.,

(Contact Person)

Keane Thomas & Pinnacoli

(Firm/Company)

789 SW Federal Hwy, Suite 310

(Address)

Stuart, FL 34994

(City, State and Zip Code)

sapinnacoli@~~tanplaw.com~~ **tanplaw.com**

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Stephen A. Pinnacoli at (772) 324-5656

(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)

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) | <input type="checkbox"/> \$155.00 Filing Fees and Certificate of Status | <input type="checkbox"/> \$180.00 Filing Fees and Certified Copy | <input type="checkbox"/> \$185.00 Filing Fees, Certified Copy, and Certificate of Status |
|--|---|---|--|

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:
Linked Rads, LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a Limited Liability Company
(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 10/16/2017
(date of organization, formation or incorporation)

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

Linked Rads, 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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Signed this 17th day of October 2023.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: [Signature]
Printed Name: Steven E. Rinehouse Title: Member

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

Signature: [Signature]
Printed Name: Steven E. Rinehouse Title: 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: \$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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 TALLAHASSEE, FL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Linked Rads. 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:

Mailing Address:

7451 Monte Verde Lane

SAME

West Palm Beach, FL 33412

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:

Stephen A. Pinnacoli

Name

789 SW Federal Hwy Suite 310

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

Stuart

FL 34994

City

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)

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TALLAHASSEE, FL
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(CONTINUED)

ARTICLE IV-

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

| <u>Title:</u> | <u>Name and Address:</u> |
|----------------------------|---------------------------|
| "AMBR" = Authorized Member | Steven E. Rinehouse |
| "MGR" = Manager | 7451 Monte Verde Lane |
| AMBR | West Palm Beach, FL 33412 |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:



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 not 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.

Steven E Rinehouse, MD

 Typed or printed name of signer

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)

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