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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

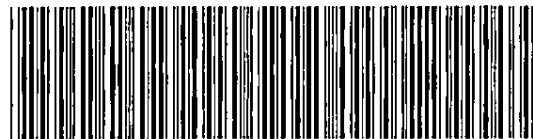
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2023 DEC 28 PM 4:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 28 2023

K. Brumblay



Writer's Direct Dial Number: 239-514-1000
Writer's Fax Number: 239-514-0377
Writer's E-Mail Address: agabel@gunster.com

December 28, 2023

Via email to kyle.brumbley@DOS.MyFlorida.com

Kyle Brumbley
Registration Division
Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314

Re: Family Legacy Planning, LLC and TheMoneyMD.com, LLC

Dear Mr. Brumbley:

As you know, our law firm represents Family Legacy Planning, LLC and theMoneyMD.com, LLC. Articles of Conversion and Articles of Organization were delivered to the Division on August 30, 2023, however, the checks sent for filing fees have never been cashed and the conversion have not yet been processed by the Division. Attached to this letter are copies of the Articles of Conversion and Articles of Organization for both limited liability companies.

Thank you for your assistance in ensuring that these conversions are timely processed. As they were initially submitted to the Division on August 30, 2023, please ensure that these conversions are effective as of that date.

Please use the following account information to debit the filing fees for these conversions:

Account Name: Gunster, Yaokley & Stewart, P.A.
Account Number: 076117000420
Total Amount to be Debited:
 Family Legacy Planning, LLC: \$ 150.00
 TheMoneyMD.com, LLC: \$ 150.00
 Total **\$ 300.00**

Please let me know if you need any additional information or have any questions. Thank you again for your assistance with this matter.

Respectfully,

/s/ Alexandra D. Gabel

Alexandra D. Gabel

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:
TheMoneyMD.com, LLC

(Enter Name of Other Business Entity)

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

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

on August 31, 2015
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:
TheMoneyMD.com, 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 26th day of August 2023

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: [Signature]

Printed Name: Richard M. Groff

Title: Manager

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

Signature: [Signature]

Printed Name: Richard M. Groff

Title: Manager

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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TheMoneyMD.com, 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:

1415 Panther Lane

Suite 517

Naples, FL 34109

Mailing Address:

1415 Panther Lane

Suite 517

Naples, FL 34109

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:

GFPAC Services, LLC

Name

5551 Ridgewood Drive, Suite 501

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

Naples

FL 34109

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)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Richard M. Groff, II

1415 Panther Lane, Suite 517

Naples, FL 34109

(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 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.

Richard M. Groff, II

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)