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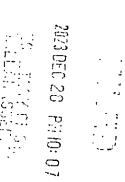
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PICK-UP	☐ WAIT	MAIL
. (B	usiness Entity Name)	
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Special Instructions to	Filing Officer:	





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COVER LETTER

TO:	New Filing Son Division of C				<i>:</i> "'		
SUBJ	ECT:	Chen Medical Per (Name of Res	mbroke Pines, LLo sulting Florida Limite		pany)	_	
			•		I fees are submitted to cordance with s. 605.1		
Please	return all corre	espondence concernin	g this matter to:				
	Yvette Ber	ens					
		(Contact Person)					
	ChenMed, I						
		(Firm/Company)					
	1395 NW 1						
		(Address)					
		lens, FL 33169					
	((City, State and Zip Code)					
	Legalnotices@ch						
E-n	nail Address: (to b	e used for future annual re	port notifications)				
For fu	rther informati	on concerning this ma	tter, please call:				
	Yvette Berens		at (305	628-	6117		
	(Name of Conta	ict Person)	a (ime Telephone Number)	_	
		or the following amou a bank located in the	•	ocess(ed by this office must	he payal	ble in US
(\$25 fo & \$125	0.00 Filing Fees r Conversion for Articles nization)	☐S155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing I and Certified Copy		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status		
	Mailing Add	ress:	-		Address:		~
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	Division of C P.O. Box 632	-			on of Corporations entre of Tallahassee		2023 DEC
	Tallahassee, l				N. Monroe Street, Suite	810	528
					assee, FL 32303	次SのEU - 10 次 CE か	3 PH 10: 07

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

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.

	Chen Medical Pembroke Pines, Inc
	(Enter Name of Other Business Entity)
2. 1	The "Other Business Entity" is a Corporation P12000 (06277 (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.
Firs	st organized, formed or incorporated under the laws of Florida (Enter state, or if a non-U.S. entity, the name of the country)
on .	7/31/2012
	(date of organization, formation or incorporation)
	(date of organization, formation or incorporation) The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Chen Medical Pembroke Pines, LLC
	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
3. ·······················4. · · ·	The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization: Chen Medical Pembroke Pines, LLC

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.

Fees for Florida Articles of Organization:

Certified Copy:

Certificate of Status:

 $(\mathbf{r}_{i}, \mathbf{r}_{i}, \mathbf{r$

Signed this 20 day of Do	ecember 20 23 .	
Signature of Authorized Represo	entative of Limited Liability Company:	
Signature of Authorized Represen Adrian Garcia	tative: Adrian Jaree Title: Authorized Represent	ntative of the MGR
	usiness Entity: See below for required signa	· · ·
Signature: Mary Chen Printed Name: Mary Chen	Title: President	
Signature:Printed Name:	Title:	
	Title:	
Signature:	Title:	
Signature:Printed Name:	Title:	
Signature:Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairm		
If Florida General Partnership or Signature of one General Partner.	Limited Liability Partnership:	
If Florida Limited Partnership or Signatures of ALL General Partners	Limited Liability Limited Partnership:	
All others: Signature of an authorized person.		
<u>Fees:</u>		
Articles of Conversion:	\$25.00	202

\$125.00

\$30.00 (Optional)

\$5.00 (Optional)

2023 DEC 28 PH IO: 08

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	Ţ	IC	LE	. I	_	Na	ım	e	:
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The name of the Limited Liability Company is:

Chen Medical Pembroke Pines, 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:

rincipal Office Address:	Mailing Address:
1395 NW 167th St	1395 NW 167th St
Miami Gardens, FL 33169	Miami Gardens, FL 33169

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:

Corporation Service	e Company
N	ame
1201 Hays St	
Florida street address (P.O. Box NOT acceptable)
Tallahassee	FL 32301
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.

Pawn Mulwiff
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
'AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Mary Chen
	1395 NW 167th St
	Miami Gardens, FL 33169
MBR	Chen Neighborhood Medical Centers of South Florida, LLC
	1305 NW 167th St
	1395 NW 167th St Miami Gardens, FL 33169
_ -	
(Use attachment if necessary)	
LE V: Other provisions, if any.	
	
BEOLUBED CLCMATUDE.	
REQUIRED SIGNATURE:	
At any (1)	
Mary Chen	

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.

Mary Chen, Manager

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)