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## 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 \$.605,1045. Florida Sentites

Statucs.		
The name of the "Other Business Entity" immediately prior to the filing of the Artic Dental Seminars & Symposial LLC	les of Conver	rsion is:
(Enter Name of Other Business Entity)	-	
The "Other Business Entity" is a limited liability company (Uniter entity type - Example, corporation, finited partnership, general partnership, comm		
First organized, formed or incorporated under the laws of Hinterstate, or if a non-U.S. entity, the	e name of the co	ountry)
May 15, 2012		
May 15, 2012  (date of organization, formation or incorporation)		
3 The name of the Florida Limited Liability Company as set forth in the attached Art	icles of Org:	ınization:
Dental Seminars & Symposia L.L.C.		
Enter Name of Florida Limited Liability Company)	_	
(The effective date: Cannot be prior to date of receipt or filed date nor more than the date this document is filed by the Florida Department of State.)  Note: It the date inserted in this block does not meet the applicable statutory filing requirements, this day a comment of effective date on the Department of State's records.  The plan of conversion has been approved in accordance with all applicable statutes.	te will not be li	
6 The "Converted or Other Business Entity" has agreed to pay any members having appra which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.	isal rights the	amount to
	<u>:</u>	282
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Signed this _	1s:	day of Septe	mber	20	:		
				ed/Liability Co			
Signature of Printed Name	Nuthoriz e <u>Drew F</u>	ed Representat Spender	ive	Title: Manager			
<u>Signatureis)</u>	on béhal	f of Other Bus	iness Entity: [S	See below for re	quired signature		
Signature:	. Drew F	Spencer		Title: Manager		<del>-11-</del>	
Signature: Printed Name	e			Title:		<del></del>	
Signature: Printed Name	e:			Title:		_ <del>_</del> _	
Signature Printed Name	·			Title.			
Signature Printed Name	e:			Title:			
Signature: _				Title		<del></del>	
If Florida C Signature of	orporatie Chairmar	<u>ui:</u> . Vice Chairma	nn, Director, or C				
If Florida G Signature of			.imited Liabilit	v Partnership:			
<u>If Florida L</u>	imited P:			v Limited Partn	ership:		
All others: Signature of		ized person.					
h <u>ees:</u>						13.45	389 <b>9</b> CF -
Fees Certi			Organization:	\$25.00 \$125.00 \$30.00 (Option \$5.00 (Optiona		. C	
							2 2 2.

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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THE HARLE OF HE	Name: a Limited Liability Cor	npany is:	
Dental Seminar	s & Symposia, L L.C	nted Liability Company, "L.L.C.," or "LLC")	
ARTICLE II	- Address:		hilita Campa
Principal Offi		s of the principal office of the Limited Lia <u>Mailing Address:</u>	iomiy Compar
4954 Baybridge	: Boelevard	4954 Baybridge Boulevard	
Estero FL 3392		Estero FL 33928	<del></del>
	<u></u>		
	Law Office of Eric L	ss of the registered agent are: . Solomon, P.A.	
		. Solomon, P.A. Name	
	Law Office of Eric L  23160 Fashion Driv	. Solomon, P.A. Name	
	Law Office of Eric L  23160 Fashion Driv	. Solomon, P.A. Name re #228	
	Law Office of Eric L  23160 Fashion Driv Florida street add	. Solomon, P.A.  Name  re #228  dress (P.O. Box <u>NOT</u> acceptable)  FL 33928	
Having beer liability o registered as statutes rei	23160 Fashion Driv Florida street add Estero  City in named as registered agrompany at the place designal and agree to act in the dating to the proper and,	. Solomon, P.A.  Name  re #228  dress (P.O. Box <u>NOT</u> acceptable)  FL 33928	the appointmer th the provision un familiar wit Chapter 605, P
Having beer liability o registered as statutes rei	23160 Fashion Driv Florida street add Estero  City of named as registered agrompany at the place designment and agree to act in the obligations of my positive obligations of my positive.	. Solomon, P.A.  Name  e #228  dress (P.O. Box <u>NOT</u> acceptable)  FL 33928  y Zip  gent and to accept service of process for the arguated in this certificate. I hereby accept this capacity. I further agree to comply with complete performance of my duties, and I also accepted this capacity.	the appointmen th the provision un familiar wit

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

"AMBR" = Authorized Member	Name and Address:
MARIAN - Mannaniven Member	t,
"MGR" = Manager	
MGR	Drew F Spencer
	4954 Baybridge Boulevard
	Estero FL 33928
Use attachment if necessary)	
REQUIRED SIGNATURE:	
This document is executed in acco	ordance with section ( 05,0203 (1) (b), Florida Statutes, I am aware t
This document is executed in accounty false information submitted in as provided for in \$ \$17.155. F.S.	ordance with section ( 05,0203 (1) (b), Florida Statutes, I am aware t
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