

L24000110359

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

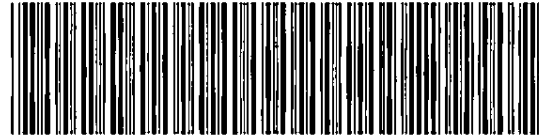
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TALLAHASSEE FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DR

TALLAHASSEE, FL 32309

(850) 524-5437 / (850) 524-6243 / (850) 491-9625

Please use funds from this account: I20210000160: \$150.00

(\$25 for Conversion & \$125 for Articles of Organization)

Authorization Signature: _____



BUSINESS NAME

DOCUMENT #

Tiffany Sizemore, D.O., LLC

___ Certified Copy

___ Certificate of Status

NEW FILINGS

___ Profit Corp

___ Not for Profit

___ Limited Liability

___ Domestication

___ LLLP

___ CORP

___ Other

___ Other

AMMENDMENTS

___ Amendment

___ Resignation of R.A. Officer/Director

___ Change of Registered Agent

___ Revocation of Dissolution

___ Merger

X Articles of Conversion

___ Restated Articles of Incorporation

___ Statement of Authority

OTHER FILINGS

___ Apostille

___ Country

___ Annual Report

___ Fictitious Name

REGISTRATION/QUALIFICATIONS

___ Foreign Filing

___ Reinstatement

___ Qualification

___ Other

EXAMINER'S INITIALS: _____

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☐ Fictitious Name

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☐ Reinstatement

☐ Qualification

☐ Other

EXAMINER'S INITIALS: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 7, 2024

FLORIDA CAPITAL COURIER SERVICES, INC.

SUBJECT: TIFFANY SIZEMORE, D.O., P.A.
Ref. Number: W24000037969

We have received your document for TIFFANY SIZEMORE, D.O., P.A.. However, the document has not been filed and is being returned for the following:

The name of the entity cannot include "P.A.." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

If you have any further questions concerning your document, please call (850) 245-6052.

KAIN COSTELLO
Regulatory Specialist II
New Filing Section

Letter Number: 724A00005044

RECEIVED

2024 MAR - 7 PM 4: 21

ALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Tiffany Sizemore, D.O., 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:

David Di Pietro, Esq.

(Contact Person)

Di Pietro Partners, PLLC

(Firm/Company)

901 East Las Olas Blvd. Suite 202

(Address)

Fort Lauderdale, FL 33301

(City, State and Zip Code)

service@ddpalaw.com

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

For further information concerning this matter, please call:

David Di Pietro

954

712-3070

at (_____) _____

(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)

☒ \$150.00 Filing Fees
(\$25 for Conversion
& \$125 for Articles
of Organization)

☐ \$155.00 Filing Fees
and Certificate of
Status

☐ \$180.00 Filing Fees
and Certified Copy

☐ \$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:
Tiffany Sizemore, D.O., P.A.

(Enter Name of Other Business Entity)
Corporation

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

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

03/21/2011
on _____
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:
Tiffany Sizemore, D.O., 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.

Signed this 20th day of February 20 24

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative:

Printed Name: Tiffany Sizemore Di Pietro

Title: Manager

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

Signature:

Printed Name: Tiffany Sizemore Di Pietro

Title: Director

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:

Tiffany Sizemore, D.O., 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:

1409 SE 1st Ave. Fort Lauderdale, FL 33316

Mailing Address:

1409 SE 1st Ave. Fort Lauderdale, FL 33316

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:

Di Pietro Partners, PLLC

Name

901 East Las Olas Blvd. Suite 202

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

Fort Lauderdale

33301

FL

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)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Tiffany Sizemore Di Pietro

1409 SE 1st Ave. Fort Lauderdale, FL 33316

AMBR

David Di Pietro

1409 SE 1st Ave. Fort Lauderdale, FL 33316

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:

Tiffany D. Pietro

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.

Tiffany D. Pietro

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)