L24000179/66

(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:

Office Use Only



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COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Villages Dental Associa	ates, LLC			
	sulting Florida Lin	ited Company)	-	
The enclosed Articles of Conversion, Artic Business Entity" into a "Florida Limited L	_			
Please return all correspondence concernin	g this matter to			
William H. Cauthen, Esq.				
(Contact Person)				
Cauthen & Burns, P.A.				
(Firm/Company)		_		
215 N. Joanna Ave.				
(Address)		_		
Tavares, FL 32778		_	7.0	
(City, State and Zip Code)			TERCHETE	77
billc@cflegal.com			5	STREET,
E-mail Address: (to be used for future annual re	port notifications)	_	بز	[7]
For further information concerning this ma William H. Cauthen or	tter, please call:		1460 2	[0]
Robin Dotson	at (352	343-2225		
(Name of Contact Person)	(Area Code	(Daytime Telephone Number)	- Om つ	
Enclosed is a check for the following amoudollars and drawn on a bank located in the		processed by this office must b	pe payable in US	
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\int \$155.00 Filing Fees and Certificate of Status	XI\$180,00 Filin and Certified Co			
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 Tallahassee, FL 32303	TALLARA 30 TALLARA TAL	

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: Villages Dental Associates, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Delaware 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 Delaware - M1300001993 (Enter state, or if a non-U.S. entity, the name of the country)
on 3/25/13
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Villages Dental Associates, LLC (Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date: N/A (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.

• • • • • • • • • • • • • • • • • • • •	
Signed this 24 day of 490	20 2024
<u>Signature of Authorized Representative of I</u>	Limited Liability Company:
Signature of Authorized Representative: Printed Name: John F. Whitt, Jr.	Title: Manager
Signature(s) on behalf of Other Business Enti	tv: ISaa halaw far raquired signaturated
Signature	
Printed Name: John F. Whitt, Jr.	Title: Sole Member
Signature:	
Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
3.	
Signature:Printed Name:	77.1
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director	r, or Officer.
If Directors or Officers have not been selected, a	
<u> If Florida General Partnership or Limited Li</u>	
Simulture of one Convert Dartner	

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

\$30.00 (Optional)

Certified Copy: Certificate of Status:

\$5.00 (Optional)



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	John F. Whitt, Jr. 121 Griffin View Dr. Lady Lake, FL 32159	
		
(Use attachment if necessary)		ANTI- HAR IA
TCLE V: Other provisions, if any.	·	
REQUIRED SIGNATURE:		<u> </u>

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.

Hohn F. Whitt, Jr.

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)

Audit#	

ARTICLES OF ORGANIZATION OF VILLAGES DENTAL ASSOCIATES, LLC

The undersigned for purposes of forming a limited liability company under the Florida Limited Liability Company Revised Act, Chapter 605, Florida Statutes hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be VILLAGES DENTAL ASSOCIATES, LLC ("Company").

ARTICLE II – ADDRESS

The mailing address and street address of the principal office of the Company is 121 Griffin View Dr., Lady Lake, FL 32159.

ARTICLE III - DURATION

The Company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State or on another effective date as specified. The Company's existence shall be perpetual unless the Company is dissolved earlier as provided in these Articles of Organization.

ARTICLE IV - REGISTERED AGENT AND OFFICE

The name of the Company's initial registered agent in Florida is John Fletcher Whitt, Jr. the address of Company's registered office in Florida is 121 Griffin View Dr., Lady Lake, FL 32159.

ARTICLE V - ADMISSION OF NEW MEMBERS

Except as set forth in the Operating Agreement, no additional members shall be admitted to the Company except with the unanimous written consent of all members of the Company and on such terms and conditions as shall be determined by all members.

William H. Cauthen, Esquire Cauthen & Burns, P.A. Attorneys at Law 215 North Joanna Avenue Tavares, Fl. 32778 (352)343-2225 Florida Bar # 0133488 Audit #

Audit #		
	Audit#	

ARTICLE VI – MANAGEMENT

The Company shall be manager – managed by a manager in accordance with Operating Agreement adopted by the members for the management of the business and affairs of the Company. The Operating Agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The initial Manager is John Fletcher Whitt, Jr.

ARTICLE VII - LIMITATION ON AGENCY AUTHORITY OF MEMBERS

Pursuant to Section 605.04074(2)(a) of the Florida Revised Limited Liability Company Act, a Member of the Company shall not be an agent of the Company solely by virtue of being a member, however, the Manager is an agent for the Company.

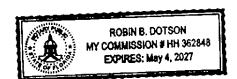
The undersigned affirms that the Company has at least one Member at the time these Articles become effective and the below Member is an authorized agent to sign the initial Articles of Organization.

IN WITNESS WHEREOF, we have signed these Articles of Organization and acknowledged them to be our act this ______ day of January, 2024 in Lake County, Florida.

In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this Affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

John Fletcher Whitt, Jr., Registered Agent and Member

STATE OF FLORIDA COUNTY OF LAKE



Print or Type Name: _

Notary Public

My Commission Expires:

Audit	#

ACCEPTANCE OF REGISTERED AGENT

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, FL Stat.

John Fletcher Whitt, Jr., Registered Agent

Dated: January _______, 2024

