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(Business Entity Name)

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ATTORNEY KEVIN DOWNEY, P.A.

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Gainesville, Florida 32607

(352) 373 - 4554

kdowney@bellsouth.net

November 14, 2024

Florida Department of State
Division of Corporations
2415 N. Monroe Street, Suite 810
Tallahassee, Florida, 32303

Attention: New Filing Section

Via Federal Express/Overnight Mail

Re: Nature Coast Anesthesia Providers, PLLC.

Please file the enclosed original signed Articles of Conversion and related Articles of Organization for the above - named professional limited liability company made effective November 15, 2024.


In addition, a check in the sum of \$150.00 is enclosed which represents the following fees:

Articles of Conversion	\$ 25.00
Articles of Organization	\$100.00
Registered Agent Fee	<u>\$ 25.00</u>
Total	<u>\$ 150.00</u>

Please return all correspondence concerning this matter to William S. Jones, 421 SE Alfred Markham Street, Lake City, FL 32025 or bjones@ncanes.com. Otherwise please contact my office at the above address or phone number with any questions on this filing.

Thank you.

Sincerely,



Kevin I. Downey

Enclosures (3)

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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 s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Nature Coast Anesthesia Providers, P.A.

(Enter Name of Other Business Entity)

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

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

on June 5, 2000
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

Nature Coast Anesthesia Providers, PLLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: November 15, 2024
(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 14th day of November 20 24

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: William S. Jones
Printed Name: William S. Jones Title: Manager

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

Signature: William S. Jones
Printed Name: William S. Jones Title: President

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)

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ARTICLES OF ORGANIZATION

OF

Nature Coast Anesthesia Providers, PLLC

The undersigned person, acting hereby as Organizer for the purpose of forming a professional limited liability company under the Florida Statutes, Chapter 605 and Chapter 621, hereby executes the following Articles of Organization.

I NAME. The name of the professional limited liability company shall be: **Nature Coast Anesthesia Providers, PLLC** ("Company").

II ADDRESS. The initial mailing address and street address of the principal office of the Company shall be 421 SE Alfred Markham Street, Lake City, FL 32025.

III DURATION. The Company shall commence its existence on November 15, 2024. The Company's existence shall be perpetual, unless the Company is dissolved as provided in these Articles of Organization.

IV PURPOSE. The general nature and purposes of business to be transacted, promoted and carried on by the Company are as follows:

- a) To engage in every aspect of the practice of anesthesiology, and all its fields of specialty.
- b) To engage and render the professional services involved only through its officers, agents, and employees who shall be in good standing and duly licensed or otherwise legally authorized within the State of Florida to render the same professional service as this Company.
- c) To invest its funds in real estate, mortgages, stocks, bonds and any other type of investments permitted by law.
- d) To engage in no other business other than the rendition of the professional services specified herein.
- e) To do everything necessary and proper in accomplishing the purposes herein set forth and to do anything incidental thereto which is not forbidden under the laws of the State of Florida.

V REGISTERED OFFICE AND AGENT. The name of the registered agent of the Company in the State of Florida is William S. Jones and the street address of the registered office of the Company is 421 SE Alfred Markham Street, Lake City, FL 32025.

VI MEMBERSHIP. None of the membership units of this professional limited liability company may be issued to anyone other than: (a) an individual licensed to provide professional anesthesia services in the State of Florida, or (b) a Florida professional service corporation or Florida professional limited liability company wholly owned by an individual or individuals licensed to provide professional anesthesia services in the State of Florida.

VII CAPITAL CONTRIBUTIONS. The members of the Company shall contribute to the capital of the Company in cash or property. Each member shall make additional capital contributions to the Company only upon the unanimous consent of all the members.

VIII ADMISSION OF NEW MEMBERS. No additional members shall be admitted to the Company without the written consent of all the members of the Company and upon such terms and conditions as shall be determined by all the members. A member may transfer his or her interest in the Company as set forth in the regulations of the Company, but the transferee shall have no right to participate in the management of the business and affairs of the Company or become a member unless all of the members of the Company, other than the member proposing to dispose of his or her interest, approves of the proposed transfer by written consent.

IX TERMINATION OF EXISTENCE. The Company shall be dissolved upon the death, bankruptcy, or dissolution of a member or manager, or upon the occurrence of any other event that terminates the continued membership of a member in the Company. However, the business of the Company may be continued by the consent of all the remaining members.

X MANAGEMENT. The Company shall be manager managed in accordance with the 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.

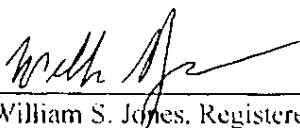
XI INITIAL MANAGER. The name and address of the initial Manager of the Company is William S. Jones, 421 SE Alfred Markham Street, Lake City, FL 32025.

IN WITNESS WHEREOF, the undersigned Organizer has executed these Articles of Organization effective November 15, 2024.


William S. Jones, CRNA, Organizer

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in the foregoing Articles of Organization, 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.

Dated: November 14, 2024


William S. Jones, Registered Agent