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(Re	questor's Name)	
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P!CK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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TO STANDARD OF SAME SAME SAME TO SERVICE TO

### **CT CORP**

### (850) 656-4724 3458 lakesore Drive Tallahassee, FL 32312

03/28/2025

Da	ate:	03/28/2025	- wil SW
		Acc#I2016000007	2 4n: C) - W
Name:	Tavistock	Life Sciences II, LLC	
Document #:			
Order #:	16232766	•	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			2025 HAR 28 AM 9:
Apostille/Notarial Certification:		Country of Destination	1 = 5
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Thank you!

### **COVER LETTER**

TO:	New Filing Se Division of Co							
SHRI	FCT. Tavistock	Life Sciences II, LLC						
3000		(Name of Res	ulting Florida Lin	nited Con	npany)	-		
The en	nclosed Articles ess Entity" into	s of Conversion, Artic a "Florida Limited Li	les of Organiza ability Compa	ition, an ny" in ac	d fees are submitted to decordance with s. 605.10	convert ar 045, F.S.	ı "Othei	•
Please	e return all corre	espondence concerning	g this matter to	:				
Miche	lle Dadisman					<del>=</del> =""	2025 MAR 28	
		(Contact Person)				ŗ	<b>X</b>	43
Tavist	ock Holdings, Inc	<b>)</b> ,					2	- 5
		(Firm/Company)	<u> </u>			35	œ	1
9350	Conroy Winderm	ere Road				TALLANASSEE. F	A	
		(Address)				1116 t	AH 9: 47	•
Winde	ermere, FL 34786	i,				r= :1.	17	
	((	City, State and Zip Code)						
corpoi	rateadmin@tavis	tock.com		_				
E-n	nail Address: (to be	used for future annual re	port notifications)					
For fu	rther information	on concerning this ma	tter, please call	:				
Miche	lle Dadisman		_at (	909-9	9957			
	(Name of Conta	ct Person)	(Area Cod	c) (Day	time Telephone Number)	-		
		or the following amou a bank located in the		process	sed by this office must b	e payable	in US	
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	☐\$180.00 Filing and Certified C		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status			
	Mailing Add New Filing So Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7		New I Divis The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite nassee, FL 32303	· 810		

### 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.

I. The name of the "Other Business Entity" immediately prior to the filing of the Art  Tavistock Life Sciences II, LLC  (Enter Name of Other Business Entity)	<u></u> ·
2. The "Other Business Entity" is a limited liability company  (Enter entity type. Example: corporation, limited partnership, general partnership, com	2025
(Enter entity type. Example: corporation, limited partnership, general partnership, come First organized, formed or incorporated under the laws of (Extended partnership). (Extended partnership) (Extended pa	nmon law or business trust, etc.)
On August 29, 2017  (date of organization, formation or incorporation)  (Enter state, or if a non-U.S. entity,	the name of the country)
3. The name of the Florida Limited Liability Company as set forth in the attached A Tavistock Life Sciences II, LLC	articles of Organization:
(Enter Name of Florida Limited Liability Company)	<u> </u>
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 that 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 document's effective date on the Department of State's records.	
5. The plan of conversion has been approved in accordance with all applicable statute	es.

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 $28^{th}$ day of $M$	1arch 20 25 .	
Signature of Authorized Represe	entative of Limited Liability Company:	
Signature of Authorized Representa	ative: Title: Manager	
Printed Name: Sarah Gentry	Title: Manager	
Signature(s) on behalf of Other Bu	usiness Entity: [See below for required signatu	
Signature: Synthy		
Printed Name Sarah Gentry	Title: Manager	
Signature:		
Printed Name:	Title:	
Signature:	Title:	
Printed Name:	i itle:	<del></del> - 2021
Signature:		2025 HĀR
Printed Name:	Title:	TAR 28
		于· 28
Signature:	Title:	S. 🖚 🖺
Printed Name:	rue:	SEE A
Signature:		
Printed Name:	Title:	
If Florida Corporation:		
Signature of Chairman, Vice Chairm	n selected, an Incorporator must sign.	
If Directors of Officers have not been	n science, an incorporator musi 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 <u>ALL</u> 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

Tavistock Life Scie			<del></del>	
18	Must contain the words "Limite	d Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - A	Address:			
The mailing addr	ess and street address o	of the principal office of the Limited Liability	y Company is:	
Principal Office	Address:	Mailing Address:	~	
6900 Tavistock La	ikes Blvd., Ste 230	6900 Tavistock Lakes Blvd., Ste 230:	. J	
Orlando, FL 32827	7	Odesde Cl 22027	· 172	
Criariao, i E 02021	<u> </u>	Orlando, FL 32827	<u> </u>	9 8
5/1d/1d0, 1 E 02021		Orlando, FL 32827	2025 HAR 28	
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Reg Company cannot serve as its of an active Florida registration.)	gistered Office, & Registered Agent's Sign wn Registered Agent. You must designate an individual on	Sature:	
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Reg Company cannot serve as its of an active Florida registration.)	gistered Office, & Registered Agent's Sign	fature:	
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Reg Company cannot serve as its of an active Florida registration.)	gistered Office, & Registered Agent's Signant Registered Agent. You must designate an individual or of the registered agent are:	Sature:	
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Reg Company cannot serve as its or an active Florida registration.) e Florida street address	gistered Office, & Registered Agent's Signant Registered Agent. You must designate an individual or of the registered agent are:	Sature:	
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Reg Company cannot serve as its or an active Florida registration.) e Florida street address	gistered Office, & Registered Agent's Sign wn Registered Agent. You must designate an individual of of the registered agent are:	Sature:	
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Reg Company cannot serve as its or an active Florida registration.) e Florida street address C T Corporation Syste	gistered Office, & Registered Agent's Sign wn Registered Agent. You must designate an individual of of the registered agent are:	Sature:	
ARTICLE III - (The Limited Liability business entity with a	Registered Agent, Reg Company cannot serve as its or an active Florida registration.) e Florida street address C T Corporation Syste	gistered Office, & Registered Agent's Sign wn Registered Agent. You must designate an individual of of the registered agent are:	Sature:	

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..

Stephane Honey
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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AR	H	. I . P	'. 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	Sarah Gentry	
	6900 Tavistock Lakes Blvd., Ste 230	
	Orlando, FL 32827	
MGR	Gregory Walker	
	6900 Tavistock Lakes Blvd., Ste 230	
	Orlando, FL 32827	
MGR	Nicholas F. Beucher III	
<del></del>	6900 Tavistock Lakes Blvd., Ste 230	
	Orlando, FL 32827	
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		<u>,</u>
(Use attachment if necessary)		rii,.
(Ose attachment it necessary)		7
CLE V: Other provisions, if any.		,
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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.

Sarah Gentry

Typed or printed name of signee

### Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 5.00 Certificate of Status (Optional) \$ 30.00 Certified Copy (Optional)