

N1800001198

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

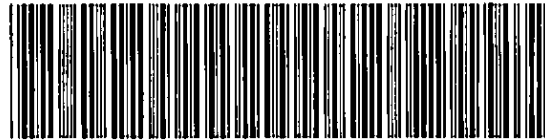
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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18 OCT 18 AM 10:49  
CLERK OF SUPERIOR COURT  
JANET L. SCHROEDER

OCT 22 2018

T SCHROEDER

LAW OFFICES

**JOSEPH A. PORRELLO, P.A.**

7875 Southwest 104<sup>th</sup> Street, Suite 103 Miami, Florida 33156 (305) 374-0092 fax (305) 514-0045

JOE@PORRELLOLAW.COM

October 15, 2018

**VIA FEDERAL EXPRESS**

Department of State  
Division of Corporations  
2661 Executive Center Circle  
Clifton Building  
Tallahassee, FL 32301

**Re: Access Central Florida, Inc  
Articles of Conversion**

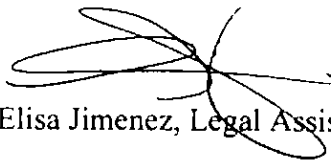
Dear representative:

Please find enclosed Certificate of Conversion, Articles of Incorporation and check for \$80.00 submitted for the conversion of Access Central Florida, LLC into a Florida Not for Profit Corporation in accordance with 617 F.S.

Our office had previously submitted Articles of Conversion for same along with the \$25 payment but received the attached letter advising us to use the attached form and to submit the outstanding fee of \$80.00.

Should you have any questions in connection with this matter, please do not hesitate to give us a call.

Very truly yours,

A handwritten signature in black ink, appearing to read 'Elisa Jimenez', with a large, stylized flourish at the end.

Elisa Jimenez, Legal Assistant

Enc: as stated

**Certificate of Conversion**  
**For**  
**"Other Business Entity"**  
**Into**  
**Florida Not for Profit**  
**Corporation**

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following  
"Other Business Entity" into a Florida Not for Profit Corporation in accordance with s. 617 F.S., (Not for Profit)

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

Access Central Florida, LLC

418-219532

Enter Name of Other Business Entity

2. The "Other Business Entity" is a limited liability company

(Enter entity type. Example: limited liability company, 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 October 1, 2018

Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now  
organized, formed or incorporated:

Non

4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:

Access Central Florida, Inc

Enter Name of Florida Not for Profit Corporation

5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_

(The effective date: Cannot be prior to nor more than 90 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.

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18 OCT 18 AM 10:43  
CLERK OF CIRCUIT COURT  
JACKSONVILLE, FLORIDA

Signed this 15 day of October, 2018.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: Jorge L. Garcia  
Printed Name: Jorge L. Garcia Title: Manager

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

Signature: Jorge L. Garcia

Printed Name: Jorge L. Garcia Title: Manager

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

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.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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FBI

## ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

### ARTICLE I NAME

The name of the corporation shall be: Access Central Florida, Inc

### ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address:  
900 S. GOLDENROD RD.

SUITE D

ORLANDO, FL 32822

Mailing address, if different is:  
121 S. ORANGE AVE.

SUITE 940

ORLANDO, FL 32801

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Nonprofit corporation to provide medical attention for low income people.

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: as stated in the bylaws.

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jorge L. Garcia, Manager

Address: 121 S. ORANGE AVE

SUITE 940

ORLANDO, FL 32801

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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18 OCT 19 AM 10:49  
NOTARY PUBLIC  
Jorge L. Garcia

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Joseph A. Porrello

Address: 7875 SW 104th st, ste 103

Miami, FL 33156

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jorge L. Garcia

Address: 121 S. Orange Ave, ste 940

Orlando, FL 32801

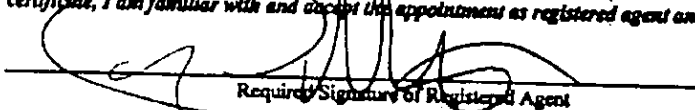
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

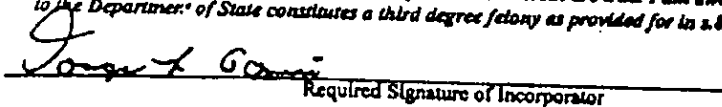
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

*Having been named as registered agent to accept service of process for the above stated corporation as the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Required Signature of Registered Agent

10/15/18  
Date

*I submit this document and affirm that the facts stated herein are true. 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.*

  
\_\_\_\_\_  
Required Signature of Incorporator

10/15/18  
Date

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18 OCT 18 AM 10:49  
TALLAHASSEE, FLORIDA