

PD30000009226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

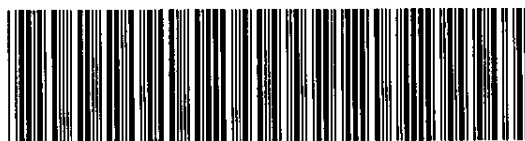
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TO: JENNIFER L. JOSE
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 SEP 23 PM 2:47

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14 SEP 23 PM 12:00

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SEP 24 2014

T. CARTER

conversion

CT Corporation System

515 E. Park Ave., Tallahassee, FL, 32301

850-205-8842

PALM HEALTHCARE COMPANY INC.		P03000009226

Thank you!

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input checked="" type="checkbox"/> Other
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	Conversion
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
Conversion		
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

9/23/2014

ST

Order#:
9286068

Ref#: _____

Amount: \$ _____

CT Corporation System

515 E. Park Ave., Tallahassee, FL, 32301

850-205-8842

PALM HEALTHCARE COMPANY INC.

P03000009226

Thank you!

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input checked="" type="checkbox"/> Other
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9/23/2014

ST

Order#:
9286068

Ref#: _____

Amount: \$ _____

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 SEP 23 PM 12:00

Certificate of Conversion
For
Florida Profit Corporation
Into
"Other Business Entity"

This Certificate of Conversion is submitted to convert the following Florida Profit Corporation into an **"Other Business Entity"** in accordance with s. 607.1113, Florida Statutes.

1. The name of the Florida Profit Corporation converting into the **"Other Business Entity"** is:

PALM HEALTHCARE COMPANY, INC.

Enter Name of Florida Profit Corporation

2. The name of the **"Other Business Entity"** is:

PALM HEALTHCARE COMPANY, INC.

Enter Name of **"Other Business Entity"**

3. The **"Other Business Entity"** is a corporation organized under the laws of Delaware.
4. The above-referenced Florida Profit Corporation has converted into an **"Other Business Entity"** in compliance with Chapter 607, F.S., and the conversion complies with the applicable laws governing the **"Other Business Entity."**
5. The plan of conversion was approved by the converting Florida Profit Corporation in accordance with Chapter 607, F.S.
6. This conversion was effective under the laws governing the **"Other Business Entity"** on September 23, 2014.
7. This conversion shall be effective in Florida on September 23, 2014.
8. The **"Other Business Entity's"** principal office address is: 1177 George Bush Boulevard, Suite #401, Delray Beach, Florida 33483.

9. If the "Other Business Entity" is an out-of-state entity not registered to transact business in Florida, the "Other Business Entity":

a.) Appoints the Florida Secretary of State as its agent for service of process in a proceeding to enforce obligations of the converting Florida profit corporation, including any appraisal rights of shareholders of the converting Florida profit corporation under ss. 607.1301-607.1333, Florida Statutes.

b.) Lists the following street and mailing address of an office, which the Florida Department of State may use for purposes of s. 607.1114(4), Florida Statutes.

Street Address: 1177 George Bush Boulevard, Suite #401
Delray Beach, Florida 33483

Mailing Address: 1177 George Bush Boulevard, Suite #401
Delray Beach, Florida 33483

10. The "Other Business Entity" has agreed to pay any shareholders having appraisal rights the amount to which they are entitled under ss. 607.1301-607.1333, F.S.

Signed this 23 day of Sept., 2014.

By: 

PETER A. HARRIGAN, DIRECTOR