

POB0000071535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

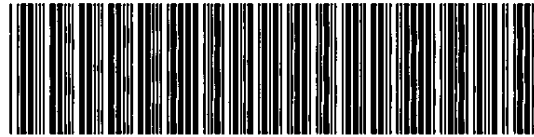
(Document Number)

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

Special Instructions to Filing Officer:

Nageh Barsaun **GAVE**  
**AUTHORIZATION BY PHONE TO**  
**CORRECT #5**  
**DATE** 5/23/06  
**DOC. EXAM.** \_\_\_\_\_

Office Use Only



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05/04/06--01046--003 \*\*113.75

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06 MAY 23 PM 1:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Odigan MAY 23 2006

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Sunshine Walk-In Clinic, Inc.  
(Name of Resulting Florida Profit Corporation)

The enclosed Certificate of Conversion, Articles of Incorporation, and fees are submitted to convert an "Other Business Entity" into a "Florida Profit Corporation" in accordance with s. 607.1115, F.S.

Please return all correspondence concerning this matter to:

Nageh Barsoum, MD  
(Contact Person)

Sunshine Walk-In Clinic  
(Firm/Company)

5205 Babcock St. NE Ste 3  
(Address)

Palm Bay, FL 32905  
(City, State and Zip Code)

For further information concerning this matter, please call:

Nageh Barsoum, MD at (321) 729-1400  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$105.00 Filing Fees    ☒ \$113.75 Filing Fees and Certificate of Status    ☐ \$113.75 Filing Fees and Certified Copy    ☐ \$122.50 Filing Fees, Certified Copy, and Certificate of Status

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 15, 2006

NAGEH BARSOUM, MD  
5205 BABCOCK STREET NE  
SUITE 3  
PALM BAY, FL 32905

SUBJECT: SUNSHINE WALK-IN CLINIC, LLC  
Ref. Number: L04000061222

We have received your document for SUNSHINE WALK-IN CLINIC, LLC and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Certificate of Conversion must state the effective date of the conversion. The effective date cannot be prior to the date of filing nor more than 90 days after the date of filing and must be the same as the effective date of the conversion under the laws governing the other business entity.

You must complete Article VII and the Incorporator must sign.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan  
Document Specialist

Letter Number: 406A00034113

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

This Certificate of Conversion **and attached Articles of Incorporation** are submitted to convert the following **"Other Business Entity"** into a **Florida Profit Corporation** in accordance with s. 607.1115, Florida Statutes.

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

Sunshine Walk-In Clinic, LLC LO4000061222

(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, sole proprietorship, 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 8-18-2004  
(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:

N/A

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

Sunshine Walk-In Clinic, Inc.

(Enter Name of Florida Profit Corporation)

5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_  
(The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)

Signed this 1<sup>st</sup> day of May, 2002.

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

(Must be signed by a Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator.)

Printed Name: Nageh Barsoum, MD Title: Chairman

**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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TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

### ARTICLE I NAME

The name of the corporation shall be:

Sunshine Walk-In Clinic, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5205 Babcock St. NE  
Suite 3  
Palm Bay, FL. US 32909

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all Lawful Business

### ARTICLE IV SHARES

The number of shares of stock is:

1000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Nageh Barsoum, MD  
chairman  
1572 Laramie Circle  
Melbourne, FL 32940 U.S.

Warda Barsoum  
Vice chairman  
1572 Laramie Circle  
Melbourne, FL 32940 U.S.

### ARTICLE VI REGISTERED AGENT

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

Nageh Barsoum, MD  
1572 Laramie Circle  
Melbourne, FL 32940

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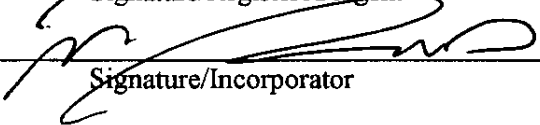
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Nageh Barsoun  
1572 Laramie Circle  
Melbourne, FL 32940

\*\*\*\*\*

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

  
\_\_\_\_\_  
Signature/Registered Agent  
  
\_\_\_\_\_  
Signature/Incorporator

5/11/06  
\_\_\_\_\_  
Date  
5/18/06  
\_\_\_\_\_  
Date

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