

PO9 000001748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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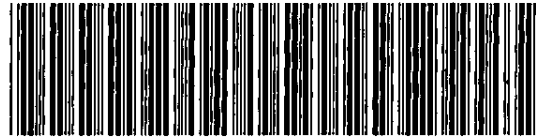
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

JAN - 9 2009

EXAMINER

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Forizs & Dogali, P.A.  
(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:

Valerie Bukowski  
(Contact Person)

Forizs & Dogali, P.A.  
(Firm/Company)

4301 Anchor Plaza Parkway, Suite 300  
(Address)

Tampa, FL 33634  
(City, State and Zip Code)

For further information concerning this matter, please call:

Valerie Bukowski at ( 813 ) 289-0700  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input type="checkbox"/> \$105.00 Filing Fees | <input type="checkbox"/> \$113.75 Filing Fees<br>and Certificate of<br>Status | <input type="checkbox"/> \$113.75 Filing Fees<br>and Certified Copy | <input checked="" type="checkbox"/> \$122.50 Filing Fees,<br>Certified Copy, and<br>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

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TALLAHASSEE, FLORIDA

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

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:

Forizs & Dogali, P.L.

L99-8513  
(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 December 3, 1999

(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:**

Forizs & Dogali, P.A.

(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 30<sup>th</sup> day of December, 2008.

**Required Signature for Florida Profit Corporation:**

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: \_\_\_\_\_

Printed Name: A. Anderson B. Dogan Title: President

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

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

Printed Name: James K. Hickman Title: V. President

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

Printed Name: Timothy D. Woodward Title: Shareholder

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

Printed Name: Robert J. Wahi Title: Shareholder

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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TALLAHASSEE, FLORIDA

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**ARTICLES OF INCORPORATION OF FORIZS & DOGALI, P.A.**

**ARTICLE I**

The name of the Professional Association is:

FORIZS & DOGALI, P.A.

**ARTICLE II**

The mailing address and street address of the principal office of the Professional Association is:

Mailing and Street Address: 4301 Anchor Plaza Parkway  
Suite 300  
Tampa, FL 33634

**ARTICLE III**

The purpose of this professional association is to engage in the practice of law and to carry on services incident to the practice of law. The practice of law is the sole and exclusive professional service to be rendered by this professional association. The professional association may own property, enter into contracts, exercise any powers and carry on any business necessary or incidental to the accomplishment of furtherance of the purposes or objects of the professional association.

**ARTICLE IV**

The number of shares of stock is:

100

**ARTICLE V**

The professional associations officers and/or directors are:

A. Anderson B. Dogali, President  
James K. Hickman, Vice President  
Robert J. Wahl, Shareholder  
Timothy D. Woodward, Shareholder

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ARTICLE VI

The name and Florida street address of the registered agent is:

Zala L. Forizs  
4301 Anchor Plaza Parkway  
Suite 300  
Tampa, Fl 33634

ARTICLE VII

The name and address of the Incorporator is:


A. Anderson B. Dogali  
4301 Anchor Plaza Parkway  
Suite 300  
Tampa, FL 33634

\*\*\*\*\*

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

12/30/08  
Date

  
\_\_\_\_\_  
Signature/Incorporator

12/30/08  
Date

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