

PO9 0000 15048

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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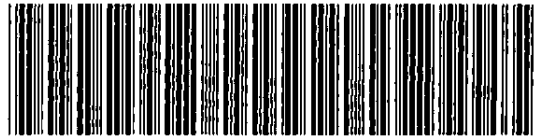
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. THOMAS

FEB 17 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LOTUS PATH WELLNESS CENTER, 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:

MARIA BELLUCCIO

(Contact Person)

LOTUS PATH WELLNESS CENTER, LLC

(Firm/Company)

4919 VAN DYKE RD

(Address)

LUTZ FL 33558

(City, State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

DR FRANK CIMINNO

(Name of Contact Person)

at (813) 948-0822

(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

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:

LOTUS PATH WELLNESS CENTER, LLC

(Enter Name of Other Business Entity)

L017 060013784

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 2/6/2007

(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:

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

LOTUS PATH WELLNESS CENTER, INC

(Enter Name of Florida Profit Corporation)

5. If not effective on the date of filing, enter the effective date: MARCH 1 2009

(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.)

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TALLAHASSEE, FLORIDA

Signed this 14TH day of FEBRUARY, 20 09.

Required Signature for Florida Profit Corporation:

Signature of Chairman, Vice Chairman, Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: MARIA E BELLUCCIO *Maria E Belluccio*
Printed Name: MARIA BELLUCCIO Title: PRESIDENT

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

Signature: *Maria E Belluccio*
Printed Name: MARIA E BELLUCCIO Title: PRESIDENT

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

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TALLAHASSEE, FLORIDA

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)

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:

LOTUS PATH WELLNESS CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4919 VAN DYKE RD - LUTZ FL - 33558

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LAWFUL PURPOSE, TO INCLUDE THE ABILITY TO BUY, SELL, PURCHASE, CONVEY, MORTGAGE OR TRANSFER IN ANY MANNER WHATSOEVER OR RETAIN IN ANY MANNER WHATSOEVER MONEY, STOCKS, BONDS, REALTY, OR ANY OTHER PROPERTY IN ANY MANOR NOT PROHIBITED BY

ARTICLE IV SHARES

The number of shares of stock is:

THE CAPITAL STOCK OF THIS CORPORATION SHALL CONSIST OF 100 SHARES OF COMMON STOCK WITHOUT NOMINAL OR PAR VALUE. THE CONSIDERATION TO BE PAID FOR EACH SHALL BE FIXED BY THE BOARD OF DIRECTORS.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MARIA E BELLUCCIO - 14207 CYPRESS TERRACE - TAMPA FL 33618-2716 P

ARTICLE VI REGISTERED AGENT

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

MARIA E BELLUCCIO
14207 CYPRESS TERRACE
TAMPA FL 33618-2716

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TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

MARIA E. BELLUCCIO
14207 CYPRESS TERRACE
TAMPA FL 33618-2716

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

Maria E. Belluccio
Signature/Registered Agent
Maria E. Belluccio
Signature/Incorporator

2/13/09
Date
2/13/09
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA