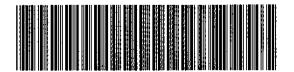
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(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer: L. SELLERS					
JUL 2 9 2011					
EXAMINER					
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Office Use Only



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COVER LETTER

Division of Corporations
SUBJECT: John H. Burger, MD LLC
Name of Florida Limited Liability Company
The enclosed Certificate of Conversion and fee(s) are submitted to convert a Florida Limited Liability Company" into an "Other Business Entity" in accordance with s.608.4403, F.S.
Please return all correspondence concerning this matter to:
James Kevin Gerhardstein Contact Person
4302 Alton Road Ste 960
Address Miami FL 33140 City, State and Zip Code
keving@medpsy.net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
James Kevin Gerhardstein at (305) 531-7774 Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee and Certificate of Status \$55.00 Filing Fee Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 6, 2011

JAMES KEVIN GERHARDSTEIN 4302 ALTON ROAD, STE. 960 MIAMI, FL 33140

SUBJECT: JOHN H. BURGER, JR., M.D., P.A.

Ref. Number: W11000035849

We have received your document for JOHN H. BURGER, JR., M.D., P.A. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

There is a balance due of \$80.00.

The specific business purpose of the professional association must be stated in the document.

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) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 211A00016114

Certificate of Conversion For "Other Business Entity" Into

Florida Profit Corporation

This Certificate of Conversion <u>and attached Articles of Incorporation</u> 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:
John H. Burger, MD LLC
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.)
Enter Name of Other Business Entity Enter 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.) Enter organized, formed or incorporated under the laws of FLORIDA (Enter state, or if a non-U.S. entity, the name of the country) Enter date "Other Business Entity" was first organized, formed or incorporated 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: The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation: Enter Name of Florida Profit Corporation Enter Name of Florida Profit Corporation 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 declinent; sled by the Florida Department of State; AND 2) must be the same as the effective date: The effective date: 1) cannot be prior to nor more than 90 days after the date this declinent; sled by the Florida Department of State; AND 2) must be the same as the effective date: The effective date: 1) cannot be prior to nor more than 90 days after the date this declinent; sled by the Florida Department of State; AND 2) must be the same as the effective date: The effective date: 1) cannot be prior to nor more than 90 days after the date this declinent; sled by the Florida Department of State; AND 2) must be the same as the effective date:
· · · · · · · · · · · · · · · · · · ·
on_JULY 1, 2009
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:
John H. Burger, JR., M.D., 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
attached Articles of Incorporation, if an effective date is listed therein.)
6. The conversion is permitted by the applicable law(s) governing the other business entity and the conversion complies with such law(s) and the requirements of s.607.1115, F.S., in effecting the conversion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

Signed this 19	day of July	, 20_11			
Required Sig	nature for Florida Profit Corpor	ation:			
Individual sign		this document are true. Any false infe	ormation	const	itutes
	Chairman, Vice Chairman, Director, corporator:	, Officer, or, if Directors or Officers h	nave not l	oeen	
Printed Name:	James Kevin Gerhardstein Title	e: VP/SECRETARY			
n /	/ () 1.1.16.604 P. I.	7 7 1/2	() (1)	d C.	
stated in this d s.817/155, F.S	ecument are true. Any false inform. [See below for regarded signature(s				
Signature: Printed Name		Title: PRESIDENT			
	Sames K. Gerhandstein				
Printed Name:	JAMES KEVIN GERHARDSTEIN	Title: VP / SECRETARY			
					
Signature:		Title:			
Printed Name:		Title:			
Printed Name:		Title:			
Signature					
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i iiiiica ivaine		Title.			
	teral Partnership or Limited Liabi de General Partner.	lity Partnership:			
	ited Partnership or Limited Liabi LL General Partners.	lity Limited Partnership:			
If Florida I im	ited Liability Company:				
	Member or Authorized Representativ	ve.	理		
J	•			تست. تبتية	CANE PARTS
All others: Signature of an	authorized person.		新大	UL 28	
Fees:			Fig.	2	
Certific Fees fo Certific	eate of Conversion: or Florida Articles of Incorporation: ed Copy: cate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	F S TABLE FREGRIDA	H 2:27	Ö

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I	NAME		
The name of the co	proporation shall be: John H.	Burger, JR., M.D., P	, A
ARTICLE II	PRINCIPAL OFFICE		.,
	Principal street address	Mailing address, if different is:	
4302 Alto	on Road ste 960		
Miami Bear	ch, FL 33140		
ARTICLE III	PURPOSE		
	hich the corporation is organized is:		
Profession	nal Association Medical F	Practice Providing Psychiatric Serv	vices
ARTICLE IV	SHARES		
The number of sha	res of stock is: 1000		
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	TORE	
	te: JOHN H BURGER PRESDENT	Name and Title:	
Address:	6465 PINETREE DRIVE CIR	Address:	
	MIAMI BEACH FLORIDA 33141		
NT 100	A IMPRICATION OF THE PROPERTY	N. Imu	
Name and 11 Address:	tle: JAMES KEVIN GERHARDSTEIN VP/SECRETARY	Name and Title: Address:	
Address.	6465 PINETREE DRIVE CIR MIAMI BEACH FLORIDA 33141		
	tle:	Name and Title:	
Address:		Address:	
		JOHN H BURGER MD	
		JOHN HOUSEN WID	
ARTICLE VI	REGISTERED AGENT		
The <u>name and Flo</u>	rida street address (P.O. Box NOT accepta	ble) of the registered agent is:	
Name:	JOHN H BURGER MD		
Address:	4302 ALTON RD Ste: 960		
	MIAMI BEACH FLORIDA 33140		
ARTICLE VII	INCORPORATOR		
	Iress of the Incorporator is:		
Name:	JOHN H BURGER JR MD PA		
Address:	4302 ALTON RD Ste: 960		
	MIAMI BEACH FLORIDA 33140		
Waying babu uam	ed dilluccristaned against to account comics of	money for the above stated and antique of the above during	
ruving been nume this certificate. Lab	wiamiliazzaith and accept the appointment	rocess for the above stated corporation at the place desig as registered agent and agree to act in this capacity	znatea in
	appointment	as registered agent and agree to act in this capacity	
HALLAN	(MARCIA)	7-19-11	
Kedui	ired Signature Registered Agent	Date	
,	organical of New York	Date	
		n are true. I am aware that any false information submi	itted in a
document to the Do	epartment of State Constitutes a thi <u>rd degre</u> e	felony as provided for in s.817.155, F.S.	
Lest)	m Suraline) 7-19-11	
Reduir	ed Signature/Incorporator	Date	