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(Re	equestor's Name)			
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PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

4/29/14

NAME:

HEALTHPOINTE ONE HUNDRED EIGHTY DEGREES, INC

TYPE OF FILING: CONVERSION

COST:

105.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

APR 24 M 8: 35 ECANHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 25, 2014

FLORIDA FILING & SEARCH SERVICES, INC. % ABBIE HODGE TALL, FL

SUBJECT: HEALTHPOINTE ONE HUNDRED EIGHTY DEGREES, INC.

Ref. Number: F12000000614

We have received your document for HEALTHPOINTE ONE HUNDRED EIGHTY DEGREES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Section 607.0120(4), 617.01201, or 605.0206, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

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) 245-6052.

Carol Mustain Regulatory Specialist II

Letter Number: 314A00008870



TO SERVICE OF SERVICE

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:							
1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is: Healthpointe One Hundred Eighty Degrees, Inc. #F12000000619 Enter Name of Other Business Entity							
Enter Name of Other Business Entity							
2. The "Other Business Entity" is a C Corp							
(Enter entity type. Example: limited liability company, limited partnership, general partnership, common law or business trust, etc.)							
first organized, formed or incorporated under the laws of Delaware							
(Enter state, or if a non-U.S. entity, the name of the country) on July 1, 2002							
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 <u>attached Articles of</u> Incorporation:							
Healthpointe One Hundred Eighty Degrees, Inc.							
Enter Name of Florida Profit Corporation							
5. If not effective on the date of filing, enter the effective date: date of filing.							
(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; <u>AND</u> 2) must be the same as the effective date listed in the attached Articles of Incorporation, if an effective date is listed therein.)							
Page 1 of 2							

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	lis.
Signed this 28th day of April	. 2014
	25 12 P
Required Signature for Florida Profit Corpor	ation: Officer, or, if Directors or Officers have not the president as Entity: [See below for required]
Signature of Chairman, Vice Chairman, Director, been selected, an Incorporator:	efficer, or, if Directors or Officers have not the state of the state
been selected, an Incorporator:	
Printed Name: Anthony J. Gigilotti Title	President 2
Required Signature(s) on behalf of Other Busine	see Profity: (See helow for required
signature(s).]	SA CHILLY.
	·
Signature:	
Printed Name: Anthony J. Gigilotti Title	Prosident
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	79.41
Printed Name:	11146:
Signature:	
Printed Name:	Title:
7470-11- C	The The sales and Line
If Florida General Partnership or Limited Liabi Signature of one General Partner.	III PARTIE BAID:
and or and orderer a market	
If Florida Limited Partnership or Limited Liabi	lity Limited Partnershin:
Signatures of ALL General Partners.	
If Florida Limited Liability Company:	
Signature of a Member or Authorized Representative	re.
ATI otherwise	
<u>All others:</u> Signature of an authorized person.	
organica or an annousce possou.	
Fees:	
Certificate of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	
Certificate of Status:	\$8.75 (Optional) \$8.75 (Optional)
i Princere of Stable'	

Page 2 of 2

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

		-			
	1	•			
A	RTICLES OF	INCORPORATION SE TO THE			
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)					
RTICLE I NAME to name of the corporation shall be:	lealthpointe O	One Hundred Eighty Degrees, Inc.			
RTICLE II PRINCIPAL OF e principal place of business/mailing	TICE .	INCORPORATION 07 and/or Chapter 621, F.S. (Profit) One Hundred Eighty Degrees, Inc.			
Principal street addre	ES.	Mailing address, if different is:			
D'brien, Florida 32	071				
blieff, Florida 52	<u> </u>				
RTTCLE III PURPOSE se purpose for which the corporatio	n is organized is:				
-	•	gricultural activities.			

E number of shares of stock is:	0				
	ERS AND/OR D	DIRECTORS			
ume and Title: Anthony J. Gi		Name and Title:			
6572 224th		Address:			
O'brien, Florid	la 32071				
me and Title: Lauralee G	Sigliotti	Name and Title:			
Idress: 11807 Asplun		Address:			
Peyton, Colo.		Address.			
ume and Title: David A. G		Name and Title:			
5249 Dune		Name and Title:			
Alexandria, Va		Address:			
-,					
RTICLE VI REGISTERES name and Florida street address	<u>LAGENT</u> (P.O. Box NOT sc	ecceptable) of the registered agent is:			
Anthony J. Gigli	otti				
dress: 6572 224th S	Street				
O'brien, Florida	32071				

ARTICL		
	and address of the Incorporator is: Anthony J. Gigliotti	25, 540,
Name: Address:	6572 224th Street	ALCON AS A STATE OF THE PARTY O
AULI COS.	O'brien, Florida 32071	TASTILL MA
		process for the above stated corporation at the place sppointment as registered agent and agree to act in this
	Required Signature/Registered Agent	Date
I mubmit t submitted	his document and affirm that the facts stated herein a document to the Department of State constitutes a	in are true. I am aware that any false information third degree felony as provided for in s.817.155, F.S.
	Q-	4-28-14
	Required Signature/Incorporator	Date