

P14000000388247

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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14 APR 24 PM 12:56  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

W14-24080

**COVER LETTER**

**TO:** Charter Section  
Division of Corporations

**SUBJECT:** Access Health Insurance 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:

Joel Medgebaw, Esq.

Contact Person

Medgebaw Law, P.A.

Firm/Company

4171 W. Hillsboro Blvd. Ste 9

Address

Coconut Creek, FL 33073

City, State and Zip Code

joel@medgebawlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joel Medgebaw

Name of Contact Person

at ( 954 ) 478 4223

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:**

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

**MAILING ADDRESS:**

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

# MEDGEBOW LAW, P.A.

4171 W. Hillsboro Blvd. Ste 9  
Coconut Creek, FL 33073

April 18, 2014

Florida Division of Corp.  
Attn: Jessica Fason  
PO Box 6327  
Tallahassee, FL 32314

Re: **FL Conversion Amendment (Amount of Shares)**  
**Access Health Insurance, LLC conversion to Access Health Insurance, Inc.**

Ms. Fason,

Kindly be advised that our Firm represents Access Health Insurance, LLC. This letter is in regards to our call and subsequent conversation with your office on April 18, 2014. It was explained that there is a hold up for converting our Company from an LLC into a Corporation because we failed to include the number of shares for the Company.

Enclosed please find an updated Articles of Incorporation with the number of shares of stock listed.

Should you have any additional questions or concerns, please address your inquiries directly to me at joel@medgebowlaw.com, or you may call me at 954-478-4223.

Very Truly,

/s/ Joel Medgebow .  
Joel Medgebow, Esq.

RECEIVED  
14 APR 24 AM 10:44  
SEVENTH JUDICIAL CIRCUIT  
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:

Access Health Insurance, LLC L10000113174

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.)

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 10/28/2010 & reinstated on 4/4/2014  
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:**

Access Health Insurance, 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; **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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14 APR 24 PM 12:56  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Signed this 7<sup>th</sup> day of April, 20 14.

**Required Signature for Florida Profit Corporation:**

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

Printed Name: Pedro Colon Title: President / CEO

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

Signature: x  
Printed Name: Pedro Colon Title: MGRM

Signature: x  
Printed Name: Jorge Guedes Title: MGRM

Signature: x  
Printed Name: George Theodore Title: MGRM

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)

**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: Access Health Insurance, Inc.

**ARTICLE II    PRINCIPAL OFFICE**

The principal place of business/mailing address is:

Principal street address

Mailing address, if different is:

Access Health Insurance, Inc.

40 SE 5th St., Ste 600

Boca Raton, FL 33432

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful purposes.

**ARTICLE IV    SHARES** 100

The number of shares of stock is:

**ARTICLE V    INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Pedro Colon / CEO

Name and Title: \_\_\_\_\_

Address: 40 SE 5th St., Ste 600

Address: \_\_\_\_\_

Boca Raton, FL 33432

Name and Title: Jorge Guedes / CFO

Name and Title: \_\_\_\_\_

Address: 40 SE 5th St., Ste 600

Address: \_\_\_\_\_

Boca Raton, FL 33432

Name and Title: George Theodore / CMO

Name and Title: \_\_\_\_\_

Address: 40 SE 5th St., Ste 600

Address: \_\_\_\_\_

Boca Raton, FL 33432

**ARTICLE VI    REGISTERED AGENT**

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

Name: Joel Medgebow, Esq.

Address: 4171 W. Hillsboro Blvd. Ste 9

Coconut Creek, FL 33073

**ARTICLE VII INCORPORATOR**

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

Name: Pedro Colon  
Address: 40 SE 5th St., Ste 600  
Boca Raton, FL 33432

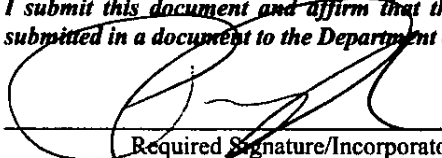
\*\*\*\*\*

*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*

  
Required Signature/Registered Agent

4/18/14  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
Required Signature/Incorporator

4/10/14  
Date

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TALLAHASSEE FLORIDA