P1600000033537

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	f)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Name	s) ·
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
·		
10165	////	

Office Use Only



800282227788

02/18/16--01006--023 **122.50

SECRETARY OF STATE TAILAHASSEE, FLORIDA

FANGE F



Jacqueline Jarrell 6490 90th Ave N St Petersburg, FL 33782 727-729-2602

TO: Charter Section

Division of Corporations

SUBJECT: Healthlink Advisors, Inc.

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:

Lindsey Jarrell
Healthlink Advisors
6490 90th Ave N
St Petersburg, FL 33782
Lindsey.Jarrell@Gmail.com

Lindsey Jarrell at 727-729-2602

Enclosed is a check in the amount of \$122.50 for Filing Fees, Certified Copy, and Certificate of Status.



February 26, 2016

JACQUELINE JARRELL 6490 90TH AVE N ST PETERSBURG, FL 33782

SUBJECT: HEALTHLINK ADVISORS LLC

Ref. Number: W16000014490

We have received your document for HEALTHLINK ADVISORS LLC and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.)

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return the corrected original and one copy of 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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 216A00004059

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: $\frac{2/18/20/6}{20/6}$. (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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signed this 15 day of February	, 20 /6	- -•	<i>J</i>	·
Required Signature for Florida Profit Corporation	<u></u>	1		
Signature of Chairman, Vice Chairman, Director, Offin Incorporator: Printed Name: Lindsey Jacak Title: Chairman	Liman ? CEO	_		
Required Signature(s) on behalf of Other Business	Entity: [See below for required si	gnature(s).	${f I}_{I_1, \dots, I_m}$	
Signature:	<u> </u>			
Printed Name: Jacqueline Jursell	Title: <u>Sole menber</u>	<u>, , , , , , , , , , , , , , , , , , , </u>	e grant	
Signature:	<u>. </u>			
Printed Name:	Title:		,	
Signature:		,		
Printed Name:	Title:		16 F	·
Signature:		 -		
Printed Name:	Title:			
Signature:		,	AN 7: PLONI	
Printed Name:	Title:	·	हैप्प क	
Signature:		· · · · · · · · · · · · · · · · · · ·	3.11	
Printed Name:		· · · · · ·		
If Florida General Partnership or Limited Liability Signature of one General Partner.	/ Partnership:		<i>.</i>	₹.
If Florida Limited Partnership or Limited Liability Signatures of ALL General Partners.	Limited Partnership:		: · · · ·	
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			

Page 2 of 2

\$70.00

\$8.75 (Optional) \$8.75 (Optional)

Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:

ARTICLES OF INCORPORATION

In Compliance with Chapter 607 and/or Chapter 621, F.S. (Profit

16 MAR II AM 7:46

Healthlink Advisors, Inc.

SECRETARY OF STATE

The undersigned incorporator, for the purpose of forming a Florida profit FLORIDA corporation, hereby adopts the following Articles of Incorporation.

ARTICLE I

The name of the corporation is: Healthlink Advisors, Inc.

ARTICLE II

The principal place of business address: 6490 90th Ave N Pinellas Park, FL 33782

ARTICLE III

The purpose for which this corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV

The number of shares the corporation is authorized to issue is: 100,000

ARTICLE V

The name and Florida street address of the registered agent is: Lindsey Jarrell 6490 90th Ave N Pinellas Park, FL 33782 I certify that I am familiar with and accept the responsibilities of registered agent. Registered Agent Signature: LINDSEY JARRELL

ARTICLE VI

The name and address of the incorporator is: Lindsey Jarrell 6490 90th Ave N Pinellas Park, FL 33782 Incorporator Signature: LINDSEY JARRELL

ARTICLE VIII

The effective date for this corporation will be: 02/18/2016

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

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

3/7/2016