P16000101287

or's Name)
)
)
e/Zip/Phone #)
] WAIT MAIL
s Entity Name)
nt Number)
Certificates of Status
Officer:
:

Office Use Only



400293161514

12/29/16--01005--009 **105.00

TILED

16 DEC 29 AN ID: 27

SECRETARY OF STATE
TALLAHASSEE, FLORINA

DEC 29 2016 T SCHROEDER

COVER LETTER

то:	Charter Section Division of Cor					
SUBJ	ECT:	Health	Resources Inte	rnat	ional Inc.	
		Name of	Resulting Florida Pi	rofit (Corporation	
		e of Conversion, Articles Profit Corporation" in ac			tees are submitted to convert an "Other Busin 15, F.S.	es
Please	e return all corres	pondence concerning this	s matter to:			
		lgor Gruendl				
		Contact Person				
	Health	Resources Internat	ional Inc.			
		Firm/Company				
	2055	Siesta Drive, Unit	5640			
		Address				
		Sarasota, FL 34277				
		City, State and Zip Code	e			
	E-mail address: (1	to be used for future annu	ial report notification	on)		
For fu	ırther information	concerning this matter,	please call:			
	lgor Gı	ruendl	at (941)	704	4-5147	
	Name of Co	ontact Person	Area Cod	e and	Daytime Telephone Number	
Enclo	sed is a check for	the following amount:				
23 \$10	05.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing F and Certified Copy		☐\$122.50 Filing Fees, Certified Copy, and Certificate of Status	
New I Divisi Clifto 2661	ET ADDRESS: Filings Section ion of Corporation in Building Executive Center hassee, FL 32301	ns Circle	N D P.	ew Fi ivisio . O. B	ING ADDRESS: illings Section on of Corporations lox 6327 assee, 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

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 VISION MARAGEMENT INC.	on is:
Health Resources International Inc.	26-459
Enter Name of Other Business Entity	
2. The "Other Business Entity" is a Exercise	
(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 NEVADA (Enter state, or if a non-U.S. entity, the name of the country)	
on 03/24/1998 -01/31/2003	
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 worganized, formed or incorporated:	hich it is now
Nevada 12/31/2002 - Present	
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:	
Health Resources International Inc.	
Enter Name of Florida Profit Corporation	
5. If not effective on the date of filing, enter the effective date: OI/OI/2017 (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed Department of State; AND 2) must be the same as the effective date listed in the attached Articles of an effective date is listed therein.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dat listed as the document's effective date on the Department of State's records.	f Incorporation,
Page 1 of 2	

FILED

16 DEC 29 AM 10: 27

SEGRETARY OF STATE
TALLAHASSEE, FLORIDA

Signed	this <u>28th</u>	day o	fDe	ecember		,	20 <u>16</u>				
Requir	ed Signatu	re for Flor	da Profit C	orporation:							
Incorpo	rator:		AX	irector, Offic	er, or, if D			have not bee	en selected, a	ın	
<u>Requir</u>	ed Signatu	re(s) on be	nalf of Othe	r Business E	Entity: [S	ee below	for require	d signature((s).]		
Signatu	re:		+ 2	R					_		
Printed	Name:	ger H. Green) 	Title:	Presid	ent				
Signatu	re:	22	12	-t					_		
Printed	Name:	gor H Gruer	dl		Title:	Secre	tary		<u></u>		
Signatu	re:	70- 1	12	-0					_		
Printed	Name:	gor H Gruer	dl_	. <u> </u>	Title:	Treas	urer		···		
Signatu	re:	Der of	- 9						_		
Printed	Name:	gor H Gruen	al		_ Title: _	Direc	tor	· · · · · · · · · · · · · · · · · · ·	_		
Signatu	re:								_		
Printed	Name:				Title:				_		
Signatu	re:								_		
Printed	Name:				Title:				_		
<u>If Flori</u> Signatu	da Genera re of one G	il Partnersi General Parti	i p or Limit er.	ed Liability	<u>Partnersl</u>	nip:			SESRETAN ALLANAS	16 DEC	71
		d Partnersh General Pa		ed Liability	Limited F	<u>'artnersl</u>	hip:		ASSEE.	C 29	
		d Liability (mber or Aut	Company: horized Rep	resentative.					FLORIS.	5	
All other		thorized per	son.						*	, 2,	
Fees:		Copy:	ion: es of Incorp	oration:		Optional) Optional)					

Page 2 of 2

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: Health	Resources International Inc.
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	
Principal street address	Mailing address, if different is:
1525 Eastbrook Drive	2055 Siesta Drive, Unit 5640
Sarasota, Florida 34231	Sarasota, Florida 34277
ARTICLE III PURPOSE The purpose for which the corporation is organized i	s:
Any activity or business permitted under the I	aw
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	<u> </u>
	第元 C 第元 2
	五
	<u> </u>
ARTICLE IV SHARES	27
The number of shares of stock is: 10000	
ARTICLE V INITIAL OFFICERS AND/OR	DIRECTORS
Name and Title: Igor H Gruendl President	Name and Title: Igor H Gruendl Secretary
Address: 2055 Siesta Drive Unit 5640	Address: 2055 Siesta Drive Unit 5640
Sarasota Florida 34277	Sarasota Florida 34277
Name and Title: Igor H Gruendl Treasurer	Name and Title: Igor H Gruendl Director
Address: 2055 Siesta Drive Unit 5640	Address: 2055 Siesta Drive Unit 5640
Sarasota Florida 34277	Sarasota Florida 34277
Name and Title:	Name and Title:
Address:	Address:

	Igor H Gruendl							
ss:	2055 Sicota Drive Unit 5640 1525	EASTBROOK	De.					
	Sarasota, Florida 34277 34231	_						
	E VII INCORPORATOR and address of the Incorporator is:							
	Igor H Gruendi							
ss:	1525 Eastbrook Drive							
	Sarasota, Florida 34231							
	een named as registered agent to accept s icate, I am familiar with and accept the a							ate
			gistered agen					ate
rtifi Lit ti	icate, I am familiar with and accept the a	ppointment as re	gistered agen	2/28/2016 Date	act in thi	s capacity	,	
rtifi Lit ti	Required Signature/Registered Agent	ppointment as re	gistered agen	2/28/2016 Date	act in thi	s capacity	,	
rtifi Lit ti	Required Signature/Registered Agent	ppointment as re	gistered agen	t and agree to 2/28/2016 Date ware that any j d for in s & 17.	act in thi	s capacity	,	
rtifi Lit ti	Required Signature/Registered Agent the document and affirm that the facts st to the Department of State constitutes a	ppointment as re	gistered agen	t and agree to 2/28/2016 Date ware that any j d for in s & 17.	act in thi	s capacity	,	
rtifi Lit ti	Required Signature/Registered Agent the document and affirm that the facts st to the Department of State constitutes a	ppointment as re	gistered agen	t and agree to 2/28/2016 Date ware that any j d for in s & 17.	act in thi	s capacity	, ubmitt	
rtifi Lit ti	Required Signature/Registered Agent the document and affirm that the facts st to the Department of State constitutes a	ppointment as re	gistered agen	t and agree to 2/28/2016 Date ware that any j d for in s & 17.	act in thi	s capacity	submitted 16 DEC 2	
rtifi Lit ti	Required Signature/Registered Agent the document and affirm that the facts st to the Department of State constitutes a	ppointment as re	gistered agen	t and agree to 2/28/2016 Date ware that any j d for in s & 17.	act in thi	rmation s	16 DEC 29	
rtifi Lit ti	Required Signature/Registered Agent the document and affirm that the facts st to the Department of State constitutes a	ppointment as re	gistered agen	t and agree to 2/28/2016 Date ware that any j d for in s & 17.	act in thi	rmation s	submitted 16 DEC 2	i i