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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:





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COVER LETTER

TO: New Filing Section Division of Corporations	ADEON/EDO INIO
SUBJECT: ATTENTIVE PREMIER C. Name of Resulting F	AREGIVERS INC Torida Profit Corporation
The enclosed Articles of Conversion, Articles of Incorpora entity into a "Florida Profit Corporation" in accordance wit	tion, and fees are submitted to convert the following eligible h ss. 607.11933 & 607.0202, F.S.
Please return all correspondence concerning this matter to:	
TERESA STINE	
Contact Person	
Firm/Company	
7539 15TH STREET	
Address	
VERO BEACH, FL 32966	
City, State and Zip Code	
denese terry d AOL. Cor E-mail address: (to be used for future annual report no	<u>notification)</u>
For further information concerning this matter, please call: TERESA STINE Name of Contact Person A	2)205-5785 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 and Certificate of	5 Filing Fees =\$122.50 Filing Fees, Certified Copy, and Certificate of Status
Mailing Address: New Filing Section Division of Corporations	Street Address: New Filing Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Conversion For Converting Eligible Entity Into Florida Profit Corporation

The Articles of Conversion and attached Articles of Incorporation are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:
ATTENTIVE PREMIER CAREGIVERS LLC
Enter Name of the Converting Entity 2. The converting entity is a LIMITED LIABILITY COMPANY
2. The converting entity is a
irst organized, formed or incorporated under the laws of FLORIDA
(Enter state, or it a non-U.S. entity, the name of the country)
on OCTOBER 6, 2015
Enter date "Converting Entity" was first organized, formed or incorporated.
The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> ATTENTIVE PREMIER CAREGIVERS INC
Enter Name of Florida Profit Corporation
This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its urrent/organic jurisdiction.
If not effective on the date of filing, enter the effective date: 05/01/2021
The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be isted as the document's effective date on the Department of State's records.

Signed this 14 day of APRIL	21
Required Signature for Florida Profit Corporation	
Signature of Director, Officer or if Directors or or if	
Required Signature(s) on behalf of Converting Flocompanies: [See below for required signature(s).]	rida partnerships, limited partnerships, and limited liability
Signature: Lulsa Stere Torosa Stino	
Printed Name: Teresa Stine	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida General Partnership or Limited Liability Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liability Signatures of ALL. General Partners.	v Limited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
All others: Signature of an authorized person.	
Fees: Articles of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)

ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

		REMIER CAREGIVERS INC
ARTICLE	II PRINCIPAL OFFICE al place of business/mailing address is:	
t tie princips	Principal street address	Mailing address, if different is:
1880 8	32ND AVE SUITE 202	7539 15TH STREET
VERC	BEACH, FL 32966	VERO BEACH, FL 32966
The purpos	III PURPOSE e for which the corporation is organized is: TH CAREGIVING AND	ANY LAWFUL BUSINESS
	TH CARLOWING AINE	7/11/ 2/11/ 32 3331/1233
 -		
ARTICLE The number	IV SHARES of stock is:	
ARTICLE The number		
ARTICLE	V OFFICERS AND/OR DIRECTORS TERESA STINE PRESIDENT	Name and Title:
ARTICLE	V OFFICERS AND/OR DIRECTORS TERESA STINE PRESIDENT	
	V OFFICERS AND/OR DIRECTORS Title: TERESA STINE, PRESIDENT	Name and Title:
ARTICLE Name and T	v officers and/or directors Title: TERESA STINE, PRESIDENT 7539 15TH STREET VERO BEACH, FL 32966 BARRY STINE TREASURER	Name and Title:Address:
ARTICLE Name and Taddress:	v officers and/or directors Title: TERESA STINE, PRESIDENT 7539 15TH STREET VERO BEACH, FL 32966 BARRY STINE TREASURER	Name and Title: Address: Name and Title:
ARTICLE	v officers and/or directors Title: TERESA STINE, PRESIDENT 7539 15TH STREET VERO BEACH, FL 32966 BARRY STINE, TREASURER	Name and Title: Address: Name and Title:
ARTICLE Name and Taddress: Name and Taddress:	v officers and/or directors Title: TERESA STINE, PRESIDENT 7539 15TH STREET VERO BEACH, FL 32966 Title: BARRY STINE, TREASURER 7539 15TH STREET	Name and Title: Address: Name and Title: Address:
ARTICLE Name and Taddress: Name and Taddress:	v officers and/or directors Title: TERESA STINE, PRESIDENT 7539 15TH STREET VERO BEACH, FL 32966 Fitle: BARRY STINE, TREASURER 7539 15TH STREET VERO BEACH,FL 32966	Name and Title: Address: Name and Title: Address:

ARTICLE VI REGISTERED AGENT

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

Name:

TERESA STINE

Address:

7539 15TH STREET

VERO BEACH, FL 32966

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

Provinced Signature (Registered Agen

Required Signature/Registered Agent

4-14-21

Date