P21000058820

. (Req	(Requestor's Name)				
. (Add	ress)	<u>.</u>			
,	,				
(1.11)					
(Address)					
(City	/State/Zip/Phon	e #)			
	<u></u>				
PICK-UP	WAIT	MAIL			
- (Rus	iness Entity Nar	mel			
(Dus	iness Linky Mai	ne)			
(Document Number)					
Certified Copies	Certificates	s of Status			
		_			
Special Instructions to Filing Officer:					
L					

Office Use Only



700389855227

CONVERS WY

2022 JUN 21 AM 9: 21

TITO

TALLAHASSEE, FIRALIONS

RECEIVED

A. RAMSEY

A. RAMSEY JUN 2 2 2022

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE: 762298 8369864 AUTHORIZATION : COST LIMIT ORDER DATE: June 21, 2022 ORDER TIME : 2:05 PM ORDER NO. : 762298-005 CUSTOMER NO: 8369864 FOREIGN FILINGS NAME: WORKIT HEALTH INC XX ___ CORPORATE/CONVERSION _____ LIMITED PARTNERSHIP ____ LIMITED LIABILITY COMPANY XXXX AMENDMENT PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY XX PLAIN STAMPED COPY _____ CERTIFICATE OF GOOD STANDING

EXAMINER:

CORPORATION SERVICE COMPANY

CONTACT PERSON: Eyliena Baker -- EXT#

COVER LETTER

a

TO:	Amendment So Division of Co			
SUBJI	CT, WORKIT	HEALTH INC		
3000		Name of I	Florida Profit Corporatio	η
		f Conversion and fee(s) are inder the laws of another ju		Florida Profit Corporation into an with s. 607.11933, F.S.
Please	return all corresp	ondence concerning this m	atter to:	
Bryan	Kendali			
		Contact Person		
Worki	t Health, Inc.			
		Firm/Company		
3300	Washtenaw Ave	e., Suite 280		
		Address		
Ann A	arbor, MI 48104			
	•	City, State and Zip Code		
legal@	workithealth.co	om		
E	-mail address: (to	be used for future annual	report notification)	
For fur	ther information	concerning this matter, plea	ase call:	
Bryan	Kendall		at () 31	73-0592
	Name of Cor	ntact Person		aytime Telephone Number
Enclos	ed is a check for t	the following amount:		
■ \$ 35	.00 Filing Fee	☐ \$43.75 Filing Fee and Certificate of Status	☐ \$43.75 Filing Fee and Certified Copy	☐ \$52.50 Filing Fee. Certified Copy, and Certificate of Status
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

607.1622 (10) As a condition of a conversion of a domestic corporation to another type of entity under s. 607.11930, the domestic corporation converting to the other type of entity must be active and current in filing its annual reports in the records of the department through December 31 of the calendar year in which the articles of conversion are submitted to the department for filing.

2022 JUN 21 AM 9: 24

Articles of Conversion For

Florida Profit Corporation

Into a

Non-Florida Business Entity

The Articles of Conversion are submitted to convert the following **Florida Profit Corporation into an** a business entity formed under the laws of another jurisdiction in accordance with s. 607.11933, Florida Statutes.

1. The name of the Florida P	rofit Corporation converting into the	(converted) resulting business entity is
WORKIT HEALTH INC		
Enter N	Same of Florida Profit Corporation	
2. The name of the resulting	business entity is:	
Workit Health, Inc.		
Ente	er Name of (Converted) Resulting I	Business Entity
3. The (converted) resulting	Corporation entity is a	
		ed partnership, general partnership, , etc.)
organized formed or incorpo	rated under the laws of Delaware	
(Enter s	state, or if a non-U.S. entity, the nai	me of the country)
4. The above referenced Flor compliance with Chapter 607	rida Profit Corporation has converted , F.S.	into another business entity in
5. The plan of conversion wa Chapter 607, F.S.	ns approved by the converting Florida	a Profit Corporation in accordance with
	 F.S. The conversion becomes effectively ovided by the organic law of the (conconversion take effect. 	
Signed this	day of	20 22
Signature: Bryan	tendall	
(Must be signed by a Direct Incorporator.)	or, Officer, or, if Directors or Offic	eers have not been selected, an
Printed Name: Bryan Kenda	II Incorporator	
Fees: Filing Fee:	\$35.00	
Certified Copy: Certificate of Status:	\$8.75 (Optional) \$8.75 (Optional)	
Cernificate of Status:	38.73 (UDHODAI)	