

P220000007156

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☒ PICK-UP

☐ WAIT

☐ MAIL

(Business Entry Name)

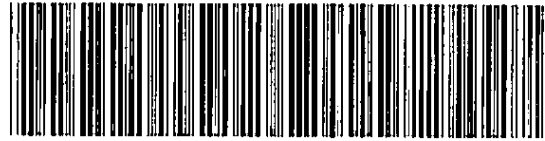
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2022 JAN 31 PM 3:16  
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TALLAHASSEE, FL

RECEIVED  
2022 JAN 31 AM 10:45  
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TALLAHASSEE, FL

# Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 1/31/2022

**\*\*WALK IN\*\***

ENTITY NAME WELLNESS MEDICAL P.C.

DOCUMENT NUMBER \_\_\_\_\_

**\*\*PLEASE FILE THE ATTACHED AND RETURN\*\***

XXXXXXX

*Plain Copy*

*Certified Copy*

*Certificate of Status*

**\*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\***

*Certified Copy of Arts. & Amendments*

*Certified Copy of Arts. & Amendments Complete File (Including Annual Reports)*

*Certificate of Status*

*Certificate of Status Reflecting:* \_\_\_\_\_

**\*\*APOSTILLE / NOTARIAL CERTIFICATION\*\***

COUNTRY OF DESTINATION \_\_\_\_\_

NUMBER OF CERTIFICATES REQUESTED \_\_\_\_\_

TOTAL OWED \$ 105.00

ACCOUNT #120160000072

*Amel D*

*Please call Tina at the above number for any issues or concerns. Thank you so much!*

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.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:

WELLNESS MEDICAL P.C.

Enter Name of the Converting Entity

2. The converting entity is a PROFESSIONAL CORPORATION

(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 Michigan

(Enter state, or if a non-U.S. entity, the name of the country)

on 08/04/2010

Enter date "Converting Entity" was first organized, formed or incorporated.

3. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:

WELLNESS MEDICAL P.A.

Enter Name of Florida Profit Corporation

4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.

5. If not effective on the date of filing, enter the effective date: \_\_\_\_\_

(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.)

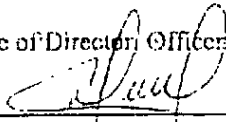
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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2022 JAN 31 PM 3:10  
TALLAHASSEE, FL

Signed this 28th day of January, 2022.

**Required Signature for Florida Profit Corporation:**

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



Printed Name: Carlos M. Alvarez Title: Attorney-in-Fact

**Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies:** [See below for required signature(s).]

Signature: 

Printed Name: Carlos M. Alvarez Title: Attorney-in-Fact

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 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:**

Articles of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

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# ARTICLES OF INCORPORATION

## Article I. Name

The name of this Florida corporation is:

WELLNESS MEDICAL P.A.

The Corporation is being formed for the practice of medicine and all other activities permitted under applicable law.

## Article II. Address

The street and mailing address of the Corporation's initial principal office is:

WELLNESS MEDICAL P.A.

6000 N Federal Highway

Fort Lauderdale FL 33308

## Article III. Registered Agent

The name and address of the Corporation's registered agent is:

Giuseppe Paese

6000 N Federal Highway

Fort Lauderdale FL 33308

## Article IV. Board of Directors

The name of each member of the Corporation's Board of Directors is:

Giuseppe Paese

The affairs of the Corporation shall be managed by a Board of Directors consisting of no less than one director. The number of directors may be increased or decreased from time to time in accordance with the Bylaws of the Corporation. The election of directors shall be done in accordance with the Bylaws. The directors shall be protected from personal liability to the fullest extent permitted by applicable law.

Computershare Governance Services Inc.,

801 US Highway 1

North Palm Beach FL 33408

(561) 694-8107

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Article V. Officers. The Corporation's officers are:

President                      Giuseppe Paese  
Secretary  
Treasurer  
Vice President

Article VI. Capital Stock

The Corporation shall have the authority to issue 5000 shares of common stock, par value no par value per share.

Article VII. Incorporator

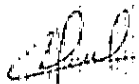
The name and address of the incorporator is:

Computershare Governance Services Inc.  
801 US Highway 1  
North Palm Beach FL 33408

Article VIII. Corporate Existence

These Articles of Incorporation shall become effective and the corporate existence will begin on January 28, 2022.

The undersigned incorporator executed these Articles of Incorporation on January 28, 2022.



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COMPUTERSHARE GOVERNANCE SERVICES INC.

Diana Serra Vice President  
Carlos M Alvarez, Attorney-in-Fact

Computershare Governance Services Inc.  
801 US Highway 1  
North Palm Beach FL 33408  
(561) 694-8107

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/OFFICE**

**CORPORATION:**

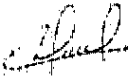
**WELLNESS MEDICAL P.A.**

**REGISTERED AGENT/OFFICE:**

**Giuseppe Paese  
6000 N Federal Highway  
Fort Lauderdale**

**FL 33308**

I agree to act as registered agent to accept service of process for the corporation named above at the place designated in this Certificate. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.



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**GIUSEPPE PAESE**

**Carlos M Alvarez, Attorney-in-Fact**

**Date: January 28, 2022**

**Computershare Governance Services Inc.  
801 US Highway 1  
North Palm Beach FL 33408  
(561) 694-8107**