

P22000011457

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

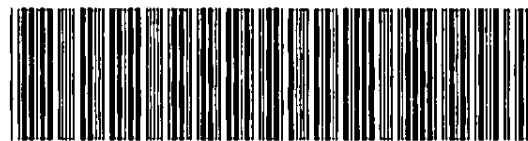
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300377015443

11/29/21--01099--007 **122.50

12/27

21 DEC 27 AM 8:29

ST. LOUIS
DIVISION OF REVENUE

J DENNIS

FEB 1 2022

M

2200155137

COVER LETTER

TO: New Filing Section
Division of Corporations
Joshua Herskovic S.C., Corporation

SUBJECT: _____
Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

Joshua Herskovic

Contact Person

Joshua Herskovic S.C., Corporation

Firm/Company

3229 NW 63rd St.

Address

Boca Raton, FL. 33496

City, State and Zip Code

joshua1745@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joshua Herskovic 847 922-1079

at ()

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$105.00 Filing Fees ☐ \$113.75 Filing Fees ☐ \$113.75 Filing Fees ☒ \$122.50 Filing Fees,
and Certificate of and Certified Copy Certified Copy, and
Status Certificate of Status

Mailing Address:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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:
Joshua Herskovic S.C.

Enter Name of the Converting Entity

Corporation

2. The converting entity is a _____
(Enter entity type. Example: limited liability company, limited partnership,
general partnership, common law or business trust, etc.)

Illinois

first organized, formed or incorporated under the laws of _____
(Enter state, or if a non-U.S. entity, the name of the country)

January 12, 2012

on _____
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**:
Joshua Herskovic S.C., corporation

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.)

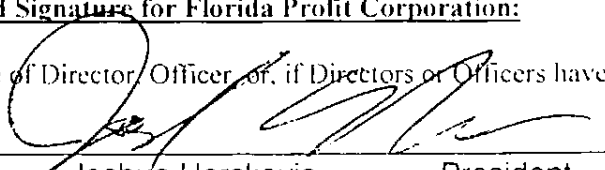
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

RECEIVED
DIVISION OF CORPORATIONS
21 DEC 27 AM 8:29

Signed this 22nd day of November, 2021.

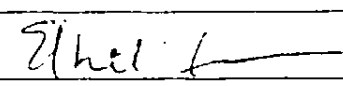
Required Signature for Florida Profit Corporation:

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


Printed Name: Joshua Herskovic Title: President

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

Signature: 
Printed Name: Joshua Herskovic Title: President

Signature: 
Printed Name: Ethel Herskovic Title: Treasurer

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)

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

ARTICLE I NAME Joshua Heskovic S.C., Corporation

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

3229 NW 63rd St.

Boca Raton, FL. 33496

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide anesthesia, radiological, and other medical services in relation to patient care and
medical technology development.

ARTICLE IV SHARES 1000

The number of shares of stock is: _____

ARTICLE V OFFICERS AND/OR DIRECTORS

Name and Title: Joshua Heskovic, President

Address: 3229 NW 63rd St.

Boca Raton, FL 33496

Name and Title: Ethel Heskovic, Treasurer

Address: 3229 NW 63rd St.

Boca Raton, FL 33496

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

21 DEC 27 AM 8:29

SECRETARY
DIVISION OF CORPORATIONS

ARTICLE VI REGISTERED AGENT

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

Ethel Herskovic

Name:

3229 NW 63rd St.

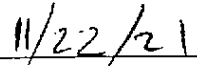
Address:

Boca Raton, FL. 33496

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



Date