

0-642-0917-1



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 9, 2023

MONICA DEMITOR
830 A1A STE 13165
PONTE VEDRA BEACH, FL 32028

SUBJECT: MMD CONSULTING INC
Ref. Number: W23000002037

*Original
Applic*

We have received your document for MMD CONSULTING INC and your check(s) totaling \$122.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

The document number of the name conflict is L20000265551.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Karen Lovelace
Regulatory Specialist II

Letter Number: 423A00000537

FILED
2023 JAN 27 PM 8:05
SECRETARY OF STATE
TALLAHASSEE, FL

01/23/23
In response to your letter I have added a name to my corp. converted to meet guidelines
M Demitor
www.sunbiz.org

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: **MMD Healthcare Consulting Inc**

Name of Resulting Florida Profit Corporation

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

Please return all correspondence concerning this matter to:

Monica Demitor

Contact Person

MMD Healthcare Consulting Inc

Firm/Company

830 A1A Suite 13165

Address

Ponte Vedra Beach, FL 32082

City, State and Zip Code

mmdconsultinginc@gmail.com

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

For further information concerning this matter, please call:

Monica Demitor at (**917**) **841-7256**

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

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2023 JAN 27 PM 8:05
SECRETARY OF STATE
TALLAHASSEE, FL

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:

MMD Consulting Inc

Enter Name of the Converting Entity

2. The converting entity is a **S 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 **Delaware**

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

on **09/04/2012**

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**:

MMD Healthcare Consulting Inc

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: **01/01/2023**

(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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2023 JAN 27 PM 8:05
SECRETARY OF STATE
TALLAHASSEE, FL

Signed this 23 day of January, 2023.

Required Signature for Florida Profit Corporation:

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

Monica Demitor

Printed Name: Monica Demitor Title: President

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

Signature: Monica Demitor

Printed Name: Monica Demitor Title: President

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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2023 JAN 27 PM 8:05
SECRETARY OF STATE
TALLAHASSEE, FL

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

ARTICLE I NAME

The name of the corporation shall be: MMD Healthcare Consulting Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

Principal street address

830 AIA Suite 13165

Ponte Vedra Beach, FL 32082

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose or purposes of the corporation shall be:

To engage in any alwful act or activity for which corporations may be organzied under the General Corporation Law of Florida

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V OFFICERS AND/OR DIRECTORS

Name and Title: Monica Demitor, President

Address: 106 Sea Hammock Way

Ponte Vedra Beach, FL 32082

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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TALLAHASSEE, FL

ARTICLE VI REGISTERED AGENT

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

Name: Monica Demitor
Address: 106 Sea Hammock Way
Ponte Vedra Beach, FL 32082

*Having been named as registered agent to accept service of process for the above stated corporation at the place designa
this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

Monica Demitor

Required Signature/Registered Agent

01/23/23
Date

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TALLAHASSEE, FL