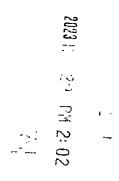
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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	·

Office Use Only



03/29/23--01004--012 **122.50



COVER LETTER

TO: New Filing Sec Division of Cor	porations				
SUBJECT. Central Pa	ark Wellness Clinic,	Inc.			
SUBJECT	Name of	Resulting Flori	da Profit	Corporation	
The enclosed Articles o entity into a "Florida Pr	f Conversion, Articles of	f Incorporation ordance with ss	, and fees , 607.119	are submitted to convert the fol 33 & 607.0202, F.S.	lowing eligible
Please return all corresp	ondence concerning this	matter to:			
Shaun Keough					
	Contact Person				
Keough Law PLLC					
	Firm/Company		_		
3505 Lake Lynda D	r. Suite 200				
	Address				
Orlando, FL 32817					
	City, State and Zip Code	 :			
skeough@yourtrade	emarkdefender.com				
	o be used for future annu	ial report notifi	cation)		
For further information	concerning this matter,	please call:			
Shaun Keough		_at (321	262-	1146	
Name of Co	ontact Person	Area	Code and	l 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 Fi and Certified		■\$122,50 Filing Fees, Certified Copy, and Certificate of Status	
Mailing Addr				Address:	63
New Filing Se Division of Co			Divisi	Filing Section on of Corporations	2023
P.O. Box 632 Tallahassee, F			2415	entre of Tallahassee N. Monroe Street, Suite 810	10
,			Tallah	assee, FL 32303	
					P

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:
Central Park Wellness Clinic, LLC
Enter Name of the Converting Entity
2. The converting entity is a limited liability company
(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 ofFlorida
(Enter state, or if a non-U.S. entity, the name of the country)
on 03/09/2023
Enter date "Converting Entity" was first organized, formed or incorporated.
3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> : Central Park Wellness Clinic. 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: (The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florid 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.

Signed	this 24day of	. 20_23	
<u>Requi</u>	red Signature for Florida Profit Corporation	<u>ı:</u>	
Signat	ure of Director/Officer, or, if Directors or Offic	·	or:
Printed	d Name: Phuong Tran Title: Dire		
	red Signature(s) on behalf of Converting Flo	rida partnerships, limited partnerships.	and limited liability
	anies: [See below for required signature(s).]		
Signat	ure:		
Printed	l Name:	Title: Member	_
Signat	ure:		
Printed	l Name:	Title:	
Signat	иге:	- Marie	
Printed	i Name:	Title:	_
Signat	ure:		_
Printed	i Name:	Title:	
Signat	ure:	· · ·	_
Printed	l Name:	Title:	_
Signat	ure:		
Printed	i Name:	Title:	_
	rida General Partnership or Limited Liabilit ure of one General Partner.	y Partnership:	
	rida Limited Partnership or Limited Liability ares of ALL General Partners.	v Limited Partnership:	
	rida Limited Liability Company: ure of a Member or Authorized Representative.		2023
All oth Signat	ners: ure of an authorized person.		8
Fees:	Articles of Conversion:	\$35.00	5
	Fees for Florida Articles of Incorporation:	\$70.00	12.7
	Certified Copy: Certificate of Status:	\$8.75 (Optional) \$8.75 (Optional)	1 2: 02

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

ARTICLE	II PRINCIPAL OFFICE		
	Il place of business/mailing address is:		
	Principal street address	Mailing add	ress, if different is:
1713 W. C	Dak Ridge Rd.		
Orlando, F	FL 32809		
	III PURPOSE for which the corporation is organized if e clinic	S:	
		1	
ARTICLE The number	IV SHARES 100,000 of shares of stock is:		
The number ARTICLE	of shares of stock is: V OFFICERS AND/OR DIRECT		
The number ARTICLE	of shares of stock is:		
The number ARTICLE	of shares of stock is: V OFFICERS AND/OR DIRECT	ORS	
The number ARTICLE Name and T	of shares of stock is: V OFFICERS AND/OR DIRECT itle: Phuong Tran, Director	ORS Name and Title:	
ARTICLE Name and T Address:	of shares of stock is: V OFFICERS AND/OR DIRECT itle: Phuong Tran, Director 1713 W. Oak Ridge Rd.	Name and Title:Address:	
ARTICLE Name and T Address:	of shares of stock is: V OFFICERS AND/OR DIRECT Title: Phuong Tran, Director 1713 W. Oak Ridge Rd. Orlando, FL 32809 Title:	Name and Title: Address: Name and Title: Name and Title: Address:	F.2.12
ARTICLE Name and T Address: Name and T Address:	of shares of stock is: V OFFICERS AND/OR DIRECT Title: Phuong Tran, Director 1713 W. Oak Ridge Rd. Orlando, FL 32809	Name and Title: Address: Name and Title: Address: Address:	- F2 3
ARTICLE Name and T Address: Name and T Address:	of shares of stock is: V OFFICERS AND/OR DIRECT Title: Phuong Tran, Director 1713 W. Oak Ridge Rd. Orlando, FL 32809	Name and Title: Address: Name and Title: Address: Name and Title: Name and Title:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~

ARTICI The name	LE VI REGISTERED AGENT e and Florida street address (P.O. Box NOT acceptable)	le) of the registered agent is:	
Name:	Shaun Keough		
Address:	3505 Lake Lynda Dr., Suite 200		
	Orlando, FL 32817		
	een named as registered agent to accept service of pro icate, I am familiar with and accept the appointment a	cess for the above stated corporation at the place designated is registered agent and agree to act in this capacity 3/24/23	ł in
	The same of the sa		
-	Required Signature/Registered Agent	Date	