

P2400012174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

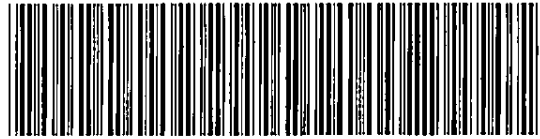
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2024 JAN 17 AM 11:18  
STATE OF TEXAS  
COMMISSIONER OF PUBLIC INFORMATION

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** UNIVERSAL HEALTHCARE RESOURCES INC.  
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:

ANIL KUMAR SRINIVASA REDDY

Contact Person

MYTAXFILER LLC

Firm/Company

4512 LEGACY DR STE 100

Address

PLANO, TEXAS 75024

City, State and Zip Code

Anil@mytaxfiler.com

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

For further information concerning this matter, please call:

ANIL KUMAR SRINIVASA REDDY at ( 732 ) 732-455-1504  
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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**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:

UNIVERSAL HEALTHCARE RESOURCES INC.

Enter Name of the Converting Entity

2. The converting entity is a 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 NEW YORK

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

on 08/21/2008

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**:

UNIVERSAL HEALTHCARE RESOURCES 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: 01/01/2024

**(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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DEPARTMENT OF STATE  
TALLAHASSEE, FL  
**FILED**

Signed this 6th day of DECEMBER, 2023.

**Required Signature for Florida Profit Corporation:**

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

Navin Seodarsan

Printed Name: NAVIN SEODARSAN Title: DIRECTOR

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

Signature: Navin Seodarsan

Printed Name: NAVIN SEODARSAN Title: DIRECTOR

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  
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: UNIVERSAL HEALTHCARE RESOURCES INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

Principal street address  
12415 N PARKLAND BAY TRL  
PARKLAND, FLORIDA 33076

Mailing address, if different is:  
12415 N PARKLAND BAY TRL  
PARKLAND, FLORIDA 33076

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

THE PURPOSE OF THIS CORPORATION IS TO ENGAGE IN ANY AND ALL LAWFUL BUSINESS.

**ARTICLE IV SHARES**

The number of shares of stock is: 200

**ARTICLE V OFFICERS AND/OR DIRECTORS**

Name and Title: NAVIN SEODARSAN (DIRECTOR)  
Address: 12415 N PARKLAND BAY TRL  
PARKLAND, FLORIDA 33076

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

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**ARTICLE VI REGISTERED AGENT**

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

Name: NAVIN SEODARSAN  
Address: 12415 N PARKLAND BAY TRL  
PARKLAND, FLORIDA 33076

\*\*\*\*\*  
*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

12/06/2023  
Date

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STATE  
TALLAHASSEE FL

**STATE OF NEW YORK**

**DEPARTMENT OF STATE**

I hereby certify that the annexed copy has been compared with the original document in the custody of the Secretary of State and that the same is a true copy of said original.



WITNESS my hand and the official seal of the Department of State, at the City of Albany, on August 22, 2008.

*Paul LaPointe*

Paul LaPointe  
Special Deputy Secretary of State

2024 JAN 17 AM 11:19  
STATE  
MILLERSVILLE, FL

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OPALID: 568555

080821000274

New York State  
Department of State  
Division of Corporations, State Records  
and Uniform Commercial Code  
Albany, NY 12231

(This form must be printed or typed in black ink)  
**CERTIFICATE OF INCORPORATION**  
**OF**

UNIVERSAL HEALTHCARE RESOURCES Inc.  
(Insert corporate name)

Under Section 402 of the Business Corporation Law

**FIRST:** The name of the corporation is: UNIVERSAL HEALTHCARE RESOURCES Inc.

**SECOND:** This corporation is formed to engage in any lawful act or activity for which a corporation may be organized under the Business Corporation Law, provided that it is not formed to engage in any act or activity requiring the consent or approval of any state official, department, board, agency or other body without such consent or approval first being obtained.

**THIRD:** The county, within this state, in which the office of the corporation is to be located is: Queens

**FOURTH:** The total number of shares which the corporation shall have authority to issue and a statement of the par value of each share or a statement that the shares are without par value are: 200 No Par Value

**FIFTH:** The Secretary of State is designated as agent of the corporation upon whom process against the corporation may be served. The address to which the Secretary of State shall mail a copy of any process accepted on behalf of the corporation is:

BELAWTIE RAMPERSAUD

1063 GIPSON STREET

FAR ROCKAWAY, NY 11691 USA

STATE  
TALLAHASSEE, FL  
2024 JAN 17 AM 11:19

FILED

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OPALID: 568555

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### Incorporator Information Required

X BELAWTIE RAMPERSAUD

(Signature)

BELAWTIE RAMPERSAUD

(Type or print name)

1063 GIPSON STREET

(Address)

FAR ROCKAWAY, NY 11691 USA

(City, State, Zip code, and Country)

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2024 JAN 17 AM 11:19  
STATE  
DEPARTMENT OF TAXES  
ALBANY, NY

## CERTIFICATE OF INCORPORATION OF

UNIVERSAL HEALTHCARE RESOURCES Inc.

(Insert corporate name)

Under Section 402 of the Business Corporation Law

FILED  
2008 AUG 21 AM 10:48

Filed by: RELIANCE TAX & ACCOUNTING SERVICES  
(Name)

108-15 101ST AVENUE

(Mailing address)

RICHMOND HILL, NY 11419 USA

(City, State, Zip code, and Country)

Note: This online form was prepared by the NYS Department of State and the NYS Governor's Office of Regulatory Reform for filing a certificate of incorporation for a business corporation. It does not contain all option provisions under the law. You are not required to use this form.

You may draft your own form or use forms available at legal stationery stores. The Department of State recommends that legal documents be prepared under the guidance of an attorney. The fee for a certificate of incorporation is \$125 plus the applicable tax on shares required by Section 180 of the Tax Law. The minimum tax on shares is \$10. The tax on 200 no par value shares is \$10 (total \$135). The certificate must be submitted with filing fee and applicable tax.

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STATE OF NEW YORK  
DEPARTMENT OF STATE  
FILED AUG 21 2008  
TAXS 10  
BY SB  
Queens

New York State  
Department of State  
Division of Corporations, State Records  
and Uniform Commercial Code  
Albany, NY 12231

(This form must be printed or typed in black ink)

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BELAWTIE RAMPERSAUD  
1063 GIPSON STREET  
FAR ROCKAWAY , NY 11691 USA

2024 JAN 17 AM 11:19  
SECRETARY OF STATE  
TALLAHASSEE FL

**FILED**

Incorporator Information Required

X BELAWTIE RAMPERSAUD  
(Signature)

BELAWTIE RAMPERSAUD  
(Type or print name)

1063 GIPSON STREET  
(Address)

FAR ROCKAWAY , NY 11691 USA  
(City, State, Zip code, and Country)

**CERTIFICATE OF INCORPORATION**  
**OF**  
UNIVERSAL HEALTHCARE RESOURCES Inc.  
(Insert corporate name)  
Under Section 402 of the Business Corporation Law

Filed by: RELIANCE TAX & ACCOUNTING SERVICES  
(Name)

108-15 101ST AVENUE  
(Mailing address)

RICHMOND HILL , NY 11419 USA  
(City, State, Zip code, and Country)

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STATE

**AGREEMENT**, entered into this 10th day of January, 2009 by & among Belawatie Rampersaud of 1063 Gipson Street, Far Rockway, NY 111691 (hereinafter referred to as "Sellers") in his capacity as Shareholder of Universal Healthcare Resources Inc and Navin Seodarshan (hereinafter referred to as "Purchaser").

**WITNESSETH:**

**WHEREAS**, the sellers are the holders of One Hundred Percent Shares in Corporation representing 100% of the Issued & outstanding Shares of the Corporation.

**WHEREAS**, the Purchaser is willing to purchase Shares representing 100% of the Stock Power in the corporation representing 100 %of the Issued & Outstanding Shares of the Corporation.

**WHEREAS**, the Sellers are willing to sell & the Purchaser is willing to purchase Hundred Percent (1000% Shares) Shares of the Stock in the Corporation Owned by the Sellers under the Terms & Subject to the obligations herein stated:

The total purchase price agreed to between the sellers & purchaser for transfer of shares in the corporation is the amount of capital contributions by the seller & is stated at \$100..00 & is being paid at the time of Signing of the Contract:

The share transfer will take place on the date of signing of this contract.

At the Signing of this agreement the specified shares of the corporation will be transferred to Navin Seodarsan and he will not be authorized to get the shares transferred.

**NOW, THEREFORE**, in consideration of the Premises and of the Mutual Covenants herein contained, the Parties agree as follows:

**SALE OF CORPORATE SHARES**

Subject to the Terms & Conditions hereof, the sellers shall transfer to the purchasers, and the Purchasers shall acquire from the Sellers, Shares representing 100% of the Issued & Outstanding Stock in the corporation on the execution of this proposed Agreement.

*Belawatie Rampersaud*

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STATE  
TALLAHASSEE, FL  
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**PURCHASE PRICE**

The Purchaser shall pay the Seller the capital contribution as the Sellers Adjusted Basis.

**INTRODUCTION OF SHAREHOLDER & OFFICER AND DIRECTOR**

Ms Belawatie Rampersaud is resigning from the Board of Directors till the Final transaction takes place.

**TAKEOVER TERMS & CONDITIONS:**

The Purchaser is taking over 100 % of all the Assets & Liabilities of the Corporation as of the date of this agreement. All Tax Liabilities from the date of this Agreement are being taken over by the purchaser.

As part of the total assets all security deposits & Dues are being taken over by the Purchaser.

**REPRESENTATION BY SELLER**

SELLERS warrants & represents:

They have not transferred Pledged, Assigned, and Hypothecated or otherwise encumbered the 100 % Shares represented by the Agreement, and that they are being sold clear & free of all the Encumbrances.

The Sellers further states that they have the Full authority to sell & transfer the 100% Shares issued to them in the Corporation.

**APPORTIONMENTS:**

The Parties agree that there shall be no Adjustment of any Kind in that there are no Outstanding Sums due to Seller from the Corporation.

**AMENDMENTS:**

No changes or modifications of this Agreement shall be valid unless the same is in writing and signed by all the parties thereto.

**INDEMNIFICATION BY THE PURCHASER:**

Purchaser agrees to indemnify and Hold harmless the Seller against any and all creditors, Liens, Leaseholds and/or Taxes occurred prior to this date.

2008 JAN 17 AM 11:59  
STATE OF MISSISSIPPI  
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IN WITNESS WHEREOF. The parties have executed this Instrument this 10th Day of January, 2009

Belawtie Rampersaud

*Belawtie Rampersaud*

*Navin Seodarsan*  
Navin Seodarsan

2024 JAN 17 AM 11:19  
STATE  
HALLANDALE, FL

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**STOCK POWER**

**FOR VALUE RECEIVED Belawatie Rampersaud transfers and unto (200) Shares of the Capital Stock of Universal Healthcare Resources inc wef Close of Business on Jan 10,2009 standing in the name of the Undersigned on the Books of the said Corporation.**

**The Seller agrees that he has received the Consideration as mutually agreed upon by the parties.**

*Belawatie Rampersaud*

**Belawatie Rampersaud**

**Jan 10,2009**

**WITNESS:**

**1.**

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TALLAHASSEE, FL

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Universal Health Care Resources Inc  
80 Ruby Street  
Elmont, NY 11003

**BOARD OF DIRECTORS**

I Belawatie Rampersaud hereby resign from the Board of Directors of Universal Health  
Care Resources Inc W.c.f Jan 10,2009

*Belawatie Rampersaud*

Belawatie Rampersaud

Jan 10,2009

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STATE  
WILMINGTON, DE, FL

**FILED**