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(Requestor's Name)	
(Address)	
, ,	
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

ENTITY NAMEPRAC	CTICE MANAGEME	ENT SUPPORT SERVICES, INC.	**WALK IN**
DOCUMENT NUMBE	ER		
	PLEASE FILL	E THE ATTACHED AND RETURN	
xxxxxxxx	Plain Copy		
	Certified Copy		
	Certificate of State	2.5	
	Certified Copy of t	HE FOLLOWING FOR THE ABOVE ENTITY** Arts & Amendments Arts & Amendments Complete File (Inclading Annual as	
	•	as Reflecting:	24 /
	APOSTILLE	"/NOTARIAL CERTIFICATION	ZOZUNAY IL AM 9: L
COUNTRY OF DESTIN	ATION		7
NUMBER OF CERTIFIC	CATES REQUESTED		
TOTAL OWED \$ 105	.00	ACCOUNT # 120140000108 / United Corporate Services, Inc. For any issues or concerns, Thank you	eith/

COVER LETTER

TO:	New Filing Section Division of Corporations
SUBJE	Practice Management Support Services, Inc.
	Name of Resulting Florida Profit Corporation
	closed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible nto a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

Mark D. Toljanic Contact Person Martin Craig Chester & Sonnenschein LLP Firm/Company 3601 Algonquin Road, Suite 860 Address Rolling Meadows, IL 60008 City, State and Zip Code mdt@mccslaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Mark D. Toljanic Name of Contact Person 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:	
Practice Management Support Services, 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	
(Enter state, or if a non-U.S. entity, the name of the country)	
on November 29, 1995	
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> Practice Management Support Services, Inc.	
Enter Name of Florida Profit Corporation	. 6
4. This conversion was approved by the eligible converting entity in accordance with this chapter and the 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. Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this data listed as the document's effective date on the Department of State's records.	laws HAY I L. by the Floriday
listed as the document's effective date on the Department of State's records.	[1]

. "			
Signed this 9th day of May	20_24		
Required Signature for Florida Profit Corporation			
Signature of Director, Officer, or, if Directors or Off	ficers have not been selected, an Incorporator:		
Printed Name: John E. Zulaski Title: Pro	esident		
Required Signature(s) on behalf of Converting Fl companies: [See below for required signature(s).]	7	d limited liability	
Signature:	<u>~ · </u>		
Printed Name: John E. Zulaski	Title:President		
Signature:			
Printed Name:			
Signature:			
Printed Name:			
Signature:			
Printed Name:	Title:		
Signature:			
Printed Name:	Title:		
Signature:			
Printed Name:	Title:		
If Florida General Partnership or Limited Liability Signature of one General Partner.	ty Partnership:		
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	ty Limited Partnership:	2024 N	<i>⑤</i>
If Florida Limited Liability Company: Signature of a Member or Authorized Representative		TALL ATTA	
All others: Signature of an authorized person.		AH 9: 07 ST	M
Fees: Articles of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	VIE 74	

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: Practice Management Support Services, Inc.

Sarasota,	Principal street address Street, Suite 750 FL 34236 PURPOSE		Mailing address, if different is:	
Sarasota,	FL 34236			
<u> </u>				
	DIIDDOSE			
• •	which the corporation is organized is: saction of any or all lawful	l purposes	for which corporations	
may be in	corporated under Florida S	tatutes, ss	. 607.11933 & 607.0202.	
				
				
ARTICLE IV The number of sl	SHARES ares of stock is:		702	;
ARTICLE V	OFFICERS AND/OR DIRECTORS		MAY	
Name and Title:	John E. Zulaski, President	Name and Title	Vera C. Loftin, Secretary	6. ser
Address:	381 Bocelli Dr	Address:	2110 N. Ocean Blvd _≥	T
_	Venice, FL 34275		Fort Lauderdale, FE33905	لل
Name and Title:		Name and Title	m 7	
Address:		Address:		-
- Name and Title:		Name and Title	;	
Address:		Address:		-
-				

ARTICLE VI REGISTERED AGENT

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

Name:

United Corporate Services, Inc.

Address:

3458 Lakeshore Drive

Tallahassee, FL 32312

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

Michael A Barr

Required Signature/Registered Agent

May 9, 2024

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