

P24000074143 <sup>FE</sup> 12-10-24

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

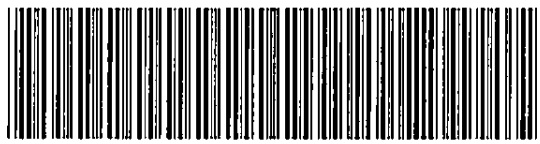
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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1 1

SUBJECT: New You Behavior Therapy Corp.

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.

Diurbel Perez Alvarez

Firm/Company

27545 SW 133rd Path

Homestead, Florida 33032

pdiurbel@gmail.com

For further information concerning this matter, please call:

Diurbel Perez Alvarez at (702 ) 787-3241

Area Code and Daytime Telephone Number

☒ \$105.00 Filing Fees ☐ \$113.75 Filing Fees ☐ \$113.75 Filing Fees ☐ \$122.50 Filing Fees.  
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Status Status Status Status

**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:

**New U Behavior Therapy 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 of **Florida**  
(Enter state, or if a non-U.S. entity, the name of the country)

on **07/21/2022**  
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**:

**New You Behavior Therapy Corp.**

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: **01/01/2025**  
(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.)

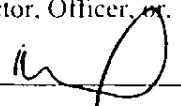
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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OFFICE

Signed this 21 day of November, 2024

**Required Signature for Florida Profit Corporation:**

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

  
Printed Name: Diurbel Perez Alvarez Title: Director

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

Signature:   
Printed Name: Diurbel Perez Alvarez Title: Manager

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

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TALLAHASSEE, FL

**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**

The name of the corporation shall be: New You Behavior Therapy Corp.

**ARTICLE II    PRINCIPAL OFFICE**

The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

27545 SW 133rd Path  
Homestead, FL 33032

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is:

The Practice of Behavioral Therapy

**ARTICLE IV    SHARES**

The number of shares of stock is: 1

**ARTICLE V    OFFICERS AND/OR DIRECTORS**

Name and Title: Diurbel Perez Alvarez/ Director

Address: 27545 SW 133rd Path  
Homestead, FL 33032

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

Address: \_\_\_\_\_

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

Address: \_\_\_\_\_

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

Address: \_\_\_\_\_

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

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Address: \_\_\_\_\_

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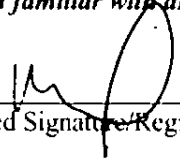
**ARTICLE VI REGISTERED AGENT**

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

Name: Diurbel Perez Alvarez  
Address: 27545 SW 133rd Path  
Homestead FL 33032

\*\*\*\*\*

*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

11/21/2024

\_\_\_\_\_  
Date

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**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L22000324212  
FILED 8:00 AM  
July 21, 2022  
Sec. Of State  
jafason

**Article I**

The name of the Limited Liability Company is:

NEW "U" BEHAVIOR THERAPY LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:

10245 NW 9TH STREET CIRCLE  
APT. 114  
MIAMI, FL. 33172

The mailing address of the Limited Liability Company is:

10245 NW 9TH STREET CIRCLE  
APT. 114  
MIAMI, FL. 33172

**Article III**

The name and Florida street address of the registered agent is:

NEW HOPE CASE MANAGEMENT SERVICES INC  
8180 NW 36 STREET  
SUITE 209  
DORAL, FL. 33166

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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: MARCOS MARTINEZ

## Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR  
DIURBEL PEREZ ALVAREZ  
10245 NW 9TH STREET CIRCLE APT.114  
MIAMI FL. 33172

L22000324212  
FILED 8:00 AM  
July 21, 2022  
Sec. Of State  
jafason

Signature of member or an authorized representative

Electronic Signature: DIURBEL PEREZ

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000324212

**Entity Name:** NEW "U" BEHAVIOR THERAPY LLC

**Current Principal Place of Business:**

27545 SW 133RD PATH  
HOMESTEAD, FL 33032

**Current Mailing Address:**

27545 SW 133RD PATH  
HOMESTEAD, FL 33032 US

**FEI Number:** 88-3408675

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

PEREZ ALVAREZ, DIURBEL  
10245 NW 9TH STREET CIRCLE  
APT. 114  
MIAMI, FL 33172 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** DIURBEL PEREZ ALVAREZ

01/12/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name PEREZ ALVAREZ, DIURBEL  
Address 10245 NW 9TH STREET CIRCLE  
APT. 114  
City-State-Zip: MIAMI FL 33172

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*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DIURBEL PEREZ ALVAREZ

MR.

01/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date