

P24000074158

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

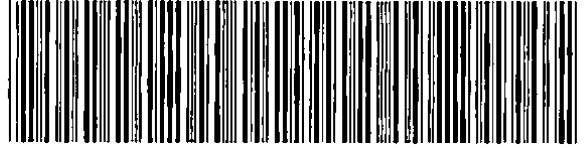
(Document Number)

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08/27/24--01013--012 **113.75

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TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 5, 2024

JIM GAY
JIM GAY CPA
3984 E ST RD 64
BRADENTON, FL 34208 US

SUBJECT: EDWARD J LEE MD, ANESTHESIA CORPORATION
Ref. Number: W24000124891

We have received your document for EDWARD J LEE MD, ANESTHESIA CORPORATION and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

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.

Crystal S Hightower
Regulatory Specialist II

Letter Number: 224A0001993

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TALLAHASSEE, FL

STATE
FL

SEP 5 2024

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: EDWARD J LEE M.D., ANESTHESIA CORPORATION

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:

JIM GAY

Contact Person

JIM GAY CPA

Firm/Company

3984 E ST RD 64

Address

BRADENTON, FL 34208

City, State and Zip Code

OFFICE@JIMGAYCPA.COM

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

For further information concerning this matter, please call:

JIM GAY

at (941) 747-0588

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

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.

The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:

EDWARD J. LEE, M.D., ANESTHESIA CORPORATION, S.C.

Enter Name of the Converting Entity

CORPORATION

The converting entity is a

(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 WISCONSIN

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

on 3.10.2009

Enter date "Converting Entity" was first organized, formed or incorporated

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3. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

EDWARD J LEE MD, ANESTHESIA CORPORATION

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: 08.21.2024

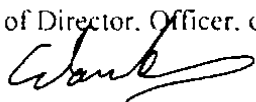
(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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.

igned this 21 day of AUGUST, 2024.

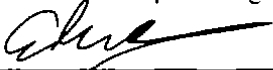
Required Signature for Florida Profit Corporation:

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



Printed Name: EDWARD LEE Title: P

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

Signature: 

Printed Name: EDWARD LEE Title: P

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.

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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)

CLE I NAME EDWARD J LEE MD, ANESTHESIA CORPORATION
The name of the corporation shall be: _____

CLE II PRINCIPAL OFFICE
The principal place of business/mailling address is:

Principal street address

Mailing address, if different is:

7 ALISTER MACKENZIE DRIVE
RASOTA, FL 34240

ICLE III PURPOSE

The purpose for which the corporation is organized is:

OWN, OPERATE, AND MAINTAIN AN ESTABLISHMENT FOR THE PRACTICE
OF MEDICINE

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TALLAHASSEE, FL

ICLE IV SHARES 9000

The number of shares of stock is: _____

ICLE V OFFICERS AND/OR DIRECTORS

Name and Title: EDWARD J LEE, P

Address: 7767 ALISTER MACKENZIE DRIVE
SARASOTA, FL 34240

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

SECTION VI REGISTERED AGENT

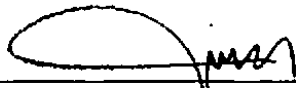
Name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

JIM GAY

3984 MANATEE AVE E

BRADENTON, FL 34208

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



Required Signature/Registered Agent

08.21.2024

Date

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