

L24000307443

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

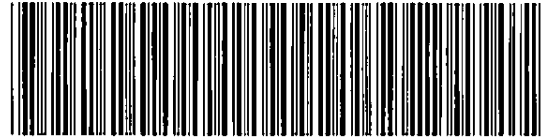
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Emailed correction 07/11/24

Office Use Only



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JUL 14 2024

05/19/24--01020 -000 **150.00

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2024 JUL 11 PM 12:06
CLERK OF SUPERIOR COURT
DIVISION OF CORPORATE & FINANCIAL SERVICES
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 26, 2024

OLGA IGNATOV
2237 GABEL OAK DR.
NORTH PORT, FL 34289 US

SUBJECT: OLGA IGNATOV PLLC
Ref. Number: W24000096444

We have received your document for and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

If you have any further questions concerning your document, please call (850) 245-6000.

Summer Chatham
Supervisor
New Filings Section

Letter Number: 124A00014050

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Olga Ignatov PLLC
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Olga Ignatov
(Contact Person)

Olga Ignatov PLLC
(Firm/Company)

2237 Gabel Oak Dr.
(Address)

North Port, FL 34289
(City, State and Zip Code)

docolga2000@hotmail.com
E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Olga Ignatov at (616) 633-4069
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

<input checked="" type="checkbox"/> \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	<input type="checkbox"/> \$155.00 Filing Fees and Certificate of Status	<input type="checkbox"/> \$180.00 Filing Fees and Certified Copy	<input type="checkbox"/> \$185.00 Filing Fees, Certified Copy, and Certificate of Status
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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
"Other Business Entity"
Into
Florida Limited Liability Company

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2024 JUL 11 PM 12:06
CABLE AND/OR VIDEO
FRANCHISING
DIVISION OF CORPORATION
TALLAHASSEE, FLORIDA

The Articles of Conversion **and attached Articles of Organization** are submitted to convert the following **"Other Business Entity"** into a **Florida Limited Liability Company** in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:
Olga Ignatov, PLLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a S Corporation
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of Michigan
(Enter state, or if a non-U.S. entity, the name of the country)

on 08/01/2019
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

Olga Ignatov PLLC
(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date: 06/01/2024
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar 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.

5. The plan of conversion has been approved in accordance with all applicable statutes.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 5th day of May 20 24.

Signature of Authorized Representative of Limited Liability Company:

Signature of Authorized Representative: Olga Ignatov
Printed Name: Olga Ignatov Title: owner

Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]

Signature: Olga Ignatov
Printed Name: Olga Ignatov Title: owner

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

Signature: _____
Printed Name: _____ Title: _____

If Florida Corporation:

Signature of Chairman, Vice Chairman, Director, or Officer.
If Directors or Officers have not been selected, an Incorporator must sign.

If Florida General Partnership or Limited Liability Partnership:

Signature of one General Partner.

If Florida Limited Partnership or Limited Liability Limited Partnership:

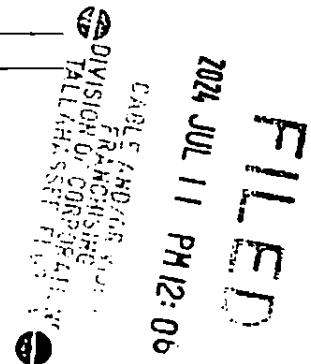
Signatures of ALL General Partners.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Olga Ignatov PLLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

2237 Gabel Oak Dr. North Port, FL 34289

Mailing Address:

2237 Gabel Oak Dr. North Port, FL 34289

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Olga Ignatov

Name

2237 Gabel Oak Dr.

Florida street address (P.O. Box **NOT** acceptable)

North Port

FL 34289

City

Zip

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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 as provided for in Chapter 605, F.S.

Olga Ignatov

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Olga Ignatov, MD, PhD
2237 Gubel Oak Dr
North Port, FL 34289

(Use attachment if necessary)

ARTICLE V: Other provisions, if any.

The PLLC is organized for the sole and purpose of rendering the
following professional services: to provide anesthesia and other
related medical services to patients by a licensed anesthesiologist.

REQUIRED SIGNATURE:

Olga Ignatov

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

Olga Ignatov

Typed or printed name of signee

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
 \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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 CLERK AND
 DIVISION OF
 TALLAHASSEE