STATE OF ALABAMA

CONVERSION OF A DOMESTIC ENTITY
Limited Liability Company to Professional Corporation

(For SOS Office Use Only)

PURPOSE: In order to change the entity type of a domestic entity (any entity formed in Alabama), the entity must deliver the documentation in this form pursuant to Section 10A, Chapter 1, Article 8, Code of Alabama 1975.

INSTRUCTIONS: Mail one (1) signed original and two (2) copies of the completed Conversion package, the filing fee of $100.00 (credit card, check, or money order) to the **Secretary of State, Business Services, P.O. Box 5616, Montgomery, Alabama, 36103-5616**, and a check or money order made out to the Judge of Probate in the county where the entity's formation documents were recorded (contact the Office of the Judge of Probate for the fees). The Secretary of State will file and transmit the copies to the Judge of Probate in accordance with 10A-1-4.02(c). The Conversion will not be registered if the credit card does not authorize and will be removed from the index if the check is dishonored. If you desire a stamped copy returned to you, supply a third copy and a pre-addressed postage paid return envelope.

This form must be typed.
Emailed transmissions will not be acknowledged, processed, or returned.

1. **Information on the converting entity (entity will change entity type at conversion and will retain the unique AL Entity ID Number originally assigned):**

   Alabama Entity ID number of converting entity: _____-_____ (Format 000-000) **INSTRUCTION TO OBTAIN ID NUMBER TO COMPLETE FORM:** You may obtain the number on our website at www.sos.alabama.gov Click on Business Services, click on Business Entity Search, click on Entity Name, enter the name of the Partnership in the appropriate box, and enter. The six (6) digit number containing a dash to the left of the name is the entity ID number. If you click on that number, you can check the details page to make certain that you have the correct entity – this verification step is strongly recommended.

   The name of the converting entity as recorded with the Secretary of State of Alabama:

   _____

   County Probate Office in Alabama where the formation documents/articles of this domestic entity were recorded and

   where the conversion document will be forwarded: _____

This Document was prepared by: (For County Probate Court Office Use Only)

CONVERSION OF DOMESTIC ENTITY/LLC to PC

2. **Information on the converted (formed/created by this conversion) – this entity will continue to exist using the same Alabama Entity ID Number as the previous converting entity:**

   The name of the new domestic entity resulting from this conversion (A domestic name reservation certificate issued by the Alabama Secretary of State must be attached if the name is changing anything more than the entity identifier information – such as LLC to PC, etc. – if only the identifier information is changing, no name reservation is required name):

   _____

3. The new converted/formed entity will be a domestic professional corporation.

4. Name of registered agent for service of process in Alabama:

   _____

5. Street (**No PO Boxes**) Address of initial registered office (**MUST** be physically located in Alabama):

   _____

   Mailing Address in Alabama (if different)_____

6. Purpose for which corporation is formed:_____

   _____; the purpose includes the transaction of any lawful business for which corporations may be incorporated in Alabama under Title 10A, Chapter 2 of the Code of Alabama.

7. Number of Shares the corporation is authorized to issue:_____Par Value_____
   (Par value is optional information and does not have to be completed.)

8. Period of duration shall be perpetual unless stated otherwise by an attached exhibit.

9. The name(s) of the Incorporator(s):_____

   Street (**No PO Boxes**) address of Incorporator(s):_____

   _____Mailing address of Incorporator(s) – (if

   different from street address):_____

   Attach a listing if more Incorporators need to be added.

10. Director's Name:_____

    Street (**No PO Boxes**) address of Director:_____

    _____Mailing address of Director(s) - (if different

from street address):_____

Director's Name:_____

Street (**No PO Boxes**) address of Director:_____

_____Mailing address of Director(s) - (if different

from street address):_____

Director's Name:_____

Street (**No PO Boxes**) address of Director:_____

_____Mailing address of Director(s) - (if different

from street address):_____

Attach listing if more Directors need to be added.

11. A director has no liability to the corporation or its shareholders for money damages for any action taken, or any failure to take any action, as a director, except liability for (A) the amount of financial benefit received by a director to which he or she is not entitled; (B) an intentional infliction of harm on the corporation or the shareholders; (C) a violation of Section 10A-2-8.33; (D) an intentional violation of criminal law; or (E) a breach of the director's duty of loyalty to the corporation or its shareholders.

12. If the converted entity is one in which one or more owners lack limited liability protection, a statement that each owner of the converting entity who is to become a owner without limited liability protection of the resulting entity has consented in writing to the conversion as required by 10A-1-8.01 is attached.

13. The undersigned certify that the conversion was approved pursuant to *Code of Alabama 1975*, Title 10A, Chapter 1, Article 8 (specifically 10A-1-8.01) and that the information included in or attached to this conversion form are true and correct.

14. Signature requirements are in accordance with 10A-1-4.01 and 10A-1-8.01 of the *Code of Alabama 1975*.

15. The filing of the converted entity as a Professional Corporation is effective upon filing by the Office of the Alabama Secretary of State or at the delayed effective date stated below (pre-effective dates are not allowed in Alabama Code). 10A-1-4.12

    The undersigned specify _____/_____/_____ as the effective date (MUST be on or after the date of filing in the Office of the Alabama Secretary of State, but no later than the 90th day after the date this instrument is filed).

CONVERSION OF DOMESTIC ENTITY/LLC to PC

Signature Page – Use additional if necessary.

___/___/_____
Date

_____
Typed Name **and** Title of Signature Below

_____
Signature of Person Authorized to Sign

___/___/_____
Date

_____
Typed Name **and** Title of Signature Below

_____
Signature of Person Authorized to Sign

___/___/_____
Date

_____
Typed Name **and** Title of Signature Below

_____
Signature of Person Authorized to Sign

Secretary of State Payment Option Sheet: If you do not send an acknowledgement copy and a pre-addressed postage paid envelope with the filling, you will not receive a credit card or prepaid account receipt from the Secretary of State's Office. If you opt for the email return of documents the credit card receipt will be emailed with the document. Hold for pickup request – acknowledgement copy will have the receipt attached. The document of record will be stamped showing the receipt of the filing fee but will not show convenience fees which will be charged; (generally these fees are between 2% and 5% of the total charge).

Information MUST be typed.

Entity Name:_____

AL Entity ID Number of converting entity: _____-_____ (ex: 000-000)

Service Requested: ___✔___$100.00 Conversion filing fee

_____$100.00 Expedite fee

Hold at Front Desk for Pick-up by:_____

(Service providers who run couriers for pick-up)

There is no notification service and there will not be a call for pick-up.

Return via email (only one email):_____

No paper copy will be sent if email is provided.

_____Charge fees to prepaid account: Account Number_____

and Account Name_____

_____

Typed Name & Signature of Authorized Individual on Account

_____ Credit Card Type:_____(Visa, MC, Discover & AmEx)

Card Number:_____Expiration Mo/Yr:_____/_____ (MM/YY)

Card Holder Name:_____

Complete Billing Address:_____

Street or PO

_____

City State Zip

Signature of Card Holder:_____

MUST be Signature of Card Holder