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PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name	)
(Do	ocument Number)	
Pertified Copies	Certificates	of Status
Special Instructions to Fi	iling Officer.	

Office Use Only



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SECRETARY OF STAR TALLAHASSEC, FE

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### Articles of Conversion

For

### "Other Business Entity"

Into

## Florida Limited Liability Company

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:  O&P Digital Technologies LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company  (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter entity type: Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
March 10, 2000 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:  O&P Digital Technologies LLC
(Enter Name of Florida Limited Liability Company)
December 12, 2022  If not effective on the date of filing, enter the effective date:
The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after he 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 locument'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.

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Signed this 12th day of December	20 22
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative:	The service of the se
Signature of Authorized Representative:	Tid. Manager
Printed Name: Paul E Prusakowski	Titte: manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature:	
Printed Name: Paul E Prusakowski	Title: Manager
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
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Signature:Printed Name:	Title
Fillited Name.	
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 Inc	corporator must sign.
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabilion Signatures of ALL General Partners.	ty Limited Partnership:
4 If others	
All others: Signature of an authorized person.	
Signature of all 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)

2022 DEC 12 AM 9: 40 SECRETARY OF STATE

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	any is:	
O&P Digital Technologies LLC (Must contain the words "Limited	Liability Company, "L.L.C.," or "LLC.")	· <u>-</u>
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limit	ed Liability Company is:
Principal Office Address:	Mailing Address:	
3870 NW 83rd St Gainesville, FL 32606	3870 NW 83rd St Gaines	ville, FL 32606
ARTICLE III - Registered Agent, Registered Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address o	n Registered Agent. You must designate ar	
Paul E Prusakowski	Name	
2272 4114 22 4 24	: vanc	
3870 NW 83rd St Florida street address	s (P.O. Box NOT acceptable)	
Gainesville	32606	
City	Zip	
	ated in this certificate. I hereby ac capacity. I further agree to comp plete performance of my duties, a	ecept the appointment as ply with the provisions of all and I am familiar with and

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Paul E Prusakowski
	3870 NW 83rd St
	Gainesville, FL 32606
<del></del>	
(Use attachment if necessary)	
CLE V: Other provisions, if any.	
DEE V. Other provisions, it may.	
	***
DECUBED CICNATURE.	
REQUIRED SIGNATURE:	·)
SHAMH-	
Detre dillere	

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.

Paul E Prusakowski

Typed or printed name of signee

Filing Fees