

L23000101728

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

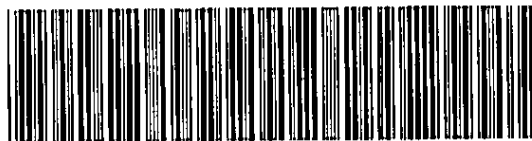
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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2023 FEB - 3 AM 11:56

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21



Helen Brock Ford  
Senior Paralegal  
T: 407.669.4322 F: 407.425.8377  
helen.ford@nelsonmullins.com

NELSON MULLINS RILEY & SCARBOROUGH LLP  
ATTORNEYS AND COUNSELORS AT LAW

390 North Orange Avenue, Suite 1400  
Orlando, FL 32801  
T: 407.669.4200 F: 407.425.8377  
nelsonmullins.com

February 2, 2023

**CERTIFIED MAIL, RETURN RECEIPT REQUESTED**

New Filing Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, Florida 32303

RE: Prashad of Ocala Limited Partnership

Dear Sir/Madam:

Enclosed for filing with your office in the order as they appear, are originals of the following:

1. Articles of Conversion for "Other Business Entity" into Florida Limited Liability Company for Prashad of Ocala Limited Partnership and Articles of Organization for Prashad of Ocala, LLC; and
2. Notice of Cancellation for Foreign Limited Partnership for Prashad of Ocala Limited Partnership, a Nevada limited partnership qualified to transact business in Florida under Document No. B16000000011.

Our firm's check for \$202.50 representing the filing fee for the Articles of Conversion of \$25.00, Articles of Organization of \$125.00 and Notice of Cancellation of \$52.50.

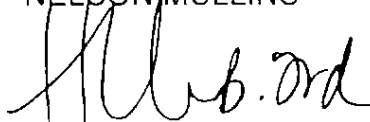
2023 FEB 2 PM 11:56  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

New Filing Section  
February 2, 2023  
Page 2

Please return filing confirmation of the enclosed originals to the undersigned at your earliest convenience. Thank you.

Sincerely,

NELSON MULLINS

A handwritten signature in black ink, appearing to read 'H. Brock Ford', written over the printed name.

Helen Brock Ford, FRP  
Senior Paralegal

hf  
Enclosures

2023 FEB - AM 11:56  
FBI  
FEB 02 2023

**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:  
PRASHAD OF OCALA LIMITED PARTNERSHIP

(Enter Name of Other Business Entity)

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

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

on 03/18/2005  
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:  
PRASHAD OF OCALA, LLC

(Enter Name of Florida Limited Liability Company)

4. 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 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.

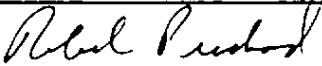
5. The plan of conversion has been approved in accordance with all applicable statutes.

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.

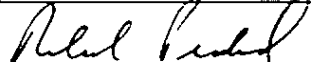
2023 FEB - 11 AM 11:56  
FILED  
CLERK OF COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE NINTH JUDICIAL CIRCUIT  
TALLAHASSEE, FLORIDA


Signed this 1st day of September 2022

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative:   
Printed Name: Rakesh Prashad Title: MANAGER

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

Signature:   
Printed Name: Rakesh Prashad Title: General Partner

Signature:   
Printed Name: Seema Prashad Title: General Partner

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)

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2023 SEP 01 AM 11:56  
STATE OF FLORIDA  
CLERK OF THE COURT

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

PRASHAD OF OCALA, LLC

(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:

5015 SE 7th Avenue  
Ocala, Florida 34480

#### Mailing Address:

5015 SE 7th Avenue  
Ocala, Florida 34480

### 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:

Rakesh Prashad

Name

5015 SE 7th Avenue

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

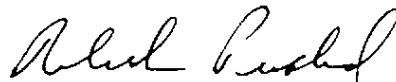
Ocala

City

FL 34480

Zip

*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.*



Registered Agent's Signature (REQUIRED)

(CONTINUED)

2023 FEB - 3 AM 11:56  
FILED  
CLERK OF COURT  
JUDICIAL CIRCUIT IN AND FOR  
FLORIDA  
11

**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:**

Rakesh Prashad

5015 SE 7th Avenue

Ocala, Florida 34480

MGR

Seema Prashad

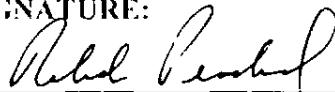
5015 SE 7th Avenue

Ocala, Florida 34480

(Use attachment if necessary)

**ARTICLE V: Other provisions, if any.**

**REQUIRED SIGNATURE:**



**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.

RAKESH PRASHAD

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)**

2023 FEB 23 AM 11:56

FILED

125

**Articles of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Limited Liability Company**

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(Enter Name of Other Business Entity)

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

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

on 03/18/2005  
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:  
PRASHAD OF OCALA, LLC

(Enter Name of Florida Limited Liability Company)

4. 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 the date this document is filed by the Florida Department of State.)

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

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2023 FEB - 3 AM 11:56  
STATE  
CLERK  
CORPORATION



Signed this 1st day of September 2022.

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: Rakesh Prashad  
Printed Name: Rakesh Prashad Title: MANAGER

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

Signature: Rakesh Prashad  
Printed Name: Rakesh Prashad Title: General Partner

Signature: Seema Prashad  
Printed Name: Seema Prashad Title: General Partner

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)

2023 FEB -3 AM 11:56  
CLERK OF DISTRICT COURT  
CLERK OF DISTRICT COURT

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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

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Ocala, Florida 34480

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Name

5015 SE 7th Avenue

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

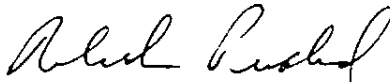
Ocala

FL 34480

City

Zip

*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..*



Registered Agent's Signature (REQUIRED)

(CONTINUED)

2023 FLO - 1 AM 11:56  
FLORIDA

**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:**

Rakesh Prashad

5015 SE 7th Avenue

Ocala, Florida 34480

MGR

Seema Prashad

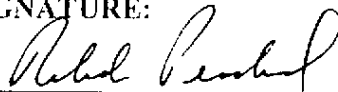
5015 SE 7th Avenue

Ocala, Florida 34480

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**Signature of a member or an authorized representative of a member**

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RAKESH PRASHAD

Typed or printed name of signee

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RECEIVED  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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DU