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Account#: 120000000088

Date:08	/10/2023	
Name:	Merritt	
Reference #:	2091203	
Entity Name:	FIRST P	RIORITY NATIONAL, LLC
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☐ Fictitious	Name	
✓ Other	CERTIFII	ED COPY OF THE FILING EVIDENCE
Authorized Amo	unt: <b>\$180</b>	
Signature:	MIA	~

F: +852.2682.9790



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Account#: I20000000088

Date:	08/10/2023	
Name:		
	2091203	
		PRIORITY NATIONAL, LLC
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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: FIRST PRIORITY RESTORATION OF ILLINOIS, PLLC
(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.)
First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country)
MAY 15, 2019
On
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
FIRST PRIORITY NATIONAL, 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.

Signed this 11 th day of August	20 <u>23</u> .
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative.  Printed Name: JENNIFER RUSSELL	i7( ))
Signature of Authorized Representative.	Title: MANAGER
Printed Name; JENNIFER RUSSELL	(IIIe: MANAGEN
Signature(s) on behalf of Other Business Entity:	
	[244 3470
Signature:	
Printed Name: JENNIFER RUSSELL	Title: MANAGER
Signature:	
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If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an In-	
If Florida General Partnership or Limited Liabili	ty Partnership:
Signature of one General Partner.	
lf Florida Limited Partnership or Limited Liabili	ty 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 Liabil	ity Company is:		
FIRST PRIORITY NATIONAL, LL			
(Must contain the we	ords "Limited Liability	Company, "L.L.C.," or "LLC.	.")
ARTICLE II - Address:			
The mailing address and street	address of the pr	incipal office of the Lin	nited Liability Company is:
Principal Office Address:		Mailing Address:	
390 Scarlet Boulevard		Same	
Oldsmar, Florida 34677			<u></u>
ARTICLE III - Registered Ag (The Limited Liability Company cannot so business entity with an active Florida reg  The name and the Florida street	erve as its own Registe distration.)	ered Agent. You must designate	
Corporation	Service Company		_
	Name		
1201 Hays S	Street		_
Florida str	eet address (P.O.	Box NOT acceptable)	
Tallahassee		FL 32301	
	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..

Welissa Clarke, Melissa Clarke, Asst. V.P.
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:	Name and Address:		
"AMBR" = Authorized Member "MGR" = Manager			
MGR - Manager	JENNIFER RUSSELL		
	390 Scarlet Boulevard		
	Oldsmar, Florida 43677		
<del></del>			
(Use attachment if necessary)			
A DTICLE W. Oshan manisiana 16 aug			
ARTICLE V: Other provisions, if any.			
REQUIRED SIGNATURE:			
MICY			
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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.

JENNIFER RUSSELL

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)