# L24000131573

(Re	equestor's Name)	
(Ad	ldress)	
	ldress)	
(710	101033)	
(Cit	ty/State/Zip/Phone	e #)
☐ PICK-UP	☐ WAIT	☐ MAIL
	<b>—</b> •••••	
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	

Office Use Only



11/13/23--01040--987 \*\*150.90





### Articles of Conversion

For

## "Other Business Entity"

Into

### Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> 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 Pronto Recovery, LLC	Conversion is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a	
(Enter entity type. Example: corporation, limited partnership, general partnership, common law	or business trust, etc.)
First organized, formed or incorporated under the laws of [Hinois] (Enter state, or if a non-U.S. entity, the name	of the country)
03.07.2014	
(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles	of Organization:
Pronto Recovery, LLC	
(Enter Name of Florida Limited Liability Company)	
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 ca 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 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 ri which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.	ghts the amount to
	2029 iv.
	<u>_</u>
	<u>:</u>

Signed this 08 day of November	2023
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative:	
Printed Name: Brian Gardner	Title: CEO
Timed Name. Share States	11110.
Signature(s) on behalf of Other Business Entity: [	See below for required signature(s)
genus (	
Signature:Printed Name: Brian Gardner	Tid CEO
Printed Name: Blian Galdilei	_ Title: GEO
Signature:	
Signature:Printed Name:	Title:
Signature:Printed Name:	(2)
Printed Name:	Title:
Cianatura:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
5.	
Signature:Printed Name:	Title
rimed Name.	Truc.
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	ty Partnersmp:
Signature of one General Partner.	
<u> If Florida Limited Partnership or Limited Liabili</u>	ty Limited Partnership:
Signatures of <u>ALL</u> General Partners.	
All others:	
Signature of an authorized person.	
Fees:	
	625.00
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00

Certified Copy: Certificate of Status: \$30.00 (Optional) \$5.00 (Optional)

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N						
The name of the l	Limited Liability Co	ompany is:				
Pronto Recovery,						-
()	dust contain the words "Li	imited Liability	Company, "L.L.C	'.," or "LLC.")		
ARTICLE II - A	address: ess and street addres	ss of the prii	ncipal office o	of the Limited	Liability (	Company is:
Principal Office	Address:		Mailing Ad	dress:		
433 Plaza Real, S	uite 275		433 Plaza Re	eal, Suite 275		
Boca Raton, FL 33	3432		Boca Raton,	FL 33432		- -
		<del></del>			<del> </del>	-
The Limited Liability	Registered Agent, Company cannot serve as n active Florida registratio	its own Register				
The name and the	: Florida street addr	ess of the re	gistered agen	i are:		
	Brian Gardner					
		Name		_		
	433 Plaza Real, S	uite 275				
	Florida street ad		Box <u>NOT</u> ac	ceptable)		
	Boca Raton		FL 33432			
	Ci	ity		Zip		
liability con registered agen statutes relati	amed as registered of spany at the place do the place do the proper and shiftigations of my posteriors.	signated in a this capacit I complete pe	this certificate ty. I further ag erformance of	e, I hereby acce gree to comply my duties, and	pt the app with the p Lam fami	ointment as rovisions of a dilar with and r 605, F.S
	Registered A	gent's Signa	nture (REQUI	RED)	:	529 isi
		(CONTINU	JED)			629 Mar. 13 (1)

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	Brian Gardner
	433 Plaza Real, Suite 275
	Boca Raton, FL 33432
(Use attachment if necessary)	
L.F. V: Other provisions, if any.	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
Signature of a member or an	authorized representative of a member th section 605,0203 (1) (b). Florida Statutes, 1 am awa
Signature of a member or an This document is executed in accordance wi	
Signature of a member or an This document is executed in accordance wi any talse information submitted in a document as provided for in s.817.155, F.S.  Brian Gardner	authorized representative of a member th section 605.0203 (1) (b). Florida Statutes, I am awa
Signature of a member or an This document is executed in accordance wi any false information submitted in a document as provided for in s.817.155, F.S.  Brian Gardner	authorized representative of a member th section 605,0203 (1) (b). Florida Statutes, I am awaint to the Department of State constitutes a third degree
Signature of a member or an This document is executed in accordance wi any talse information submitted in a document as provided for in s.817.155, F.S.  Brian Gardner  Types	authorized representative of a member th section 605,0203 (1) (b). Florida Statutes, I am aware to the Department of State constitutes a third degree d or printed name of signee  Filing Fees
Signature of a member or an This document is executed in accordance wi any talse information submitted in a document as provided for in s.817.155, F.S.  Brian Gardner  Types	authorized representative of a member th section 605.0203 (1) (b). Florida Statutes. I am award to the Department of State constitutes a third degree d or printed name of signee  Filing Fees Organization and Designation of Registered
Signature of a member or an This document is executed in accordance wi any false information submitted in a document as provided for in s.817.155. F.S.  Brian Gardner  Type:  \$125.00 Filling Fee for Articles of C	authorized representative of a member th section 605.0203 (1) (b). Florida Statutes. I am award to the Department of State constitutes a third degree d or printed name of signee  Filing Fees Organization and Designation of Registered
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