# L24000 | 93111

(Rec	questor's Name)	
(Add	iress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
	cument Number)	
(200	ament Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	





800422735428

01/30/24--01033--009 \*\*150.00

2024 JAN 30 PH 3: 09

T. MATTHEWS

APR 3 0 2024





February 27, 2024

CHRISTOPHER J. THORNTON 100 AVIATION DRIVE S., #106 NAPLES, FL 34104 US

SUBJECT: PRP SOLUTIONS, LLC Ref. Number: W24000032481

We have received your document for PRP SOLUTIONS, LLC and check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is P10000097278.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tekayla T Matthews Regulatory Specialist II

Letter Number: 024A00004251

#### **COVER LETTER**

TO: New Filing Section Division of Corpora			
SUBJECT: PRP Innovation	ns, LLC		
	(Name of Resulti	ing Florida Lin	nited Company)
		_	tion, and fees are submitted to convert an "Other ny" in accordance with s. 605.1045, F.S.
Please return all correspond	dence concerning th	his matter to	
Christopher J. Thornton			
(Cor	itact Person)		_
Thornton Law Firm, PLLC			
(Fire	n/Company)		_
100 Aviation Drive S., #106			
	Address)		_
Naples, FL 34104			
(City, St	ate and Zip Code)		_
paulrobertp@gmail.com			
E-mail Address: (to be used	for future annual repor	t notifications)	_
For further information cor	ncerning this matter	r, please call	
Paul Robert Prusinowski	41	t ( <u>201</u>	<sub>√</sub> 663.3541
(Name of Contact Person	a ən)	(Area Cod	(Daytime Telephone Number)
Enclosed is a check for the dollars and drawn on a ban	•		processed by this office must be payable in US
	'ertificate of a s	IS180.00 Filin nd Certified Co	
Mailing Address:	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	7 00 00	Street Address:
New Filing Section			New Filing Section
Division of Corpora	itions		Division of Corporations
P.O. Box 6327 Tallahassee, FL 323	81 <i>a</i>		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
i ununussee. 1 12 722	· • •		Tallahassee, FL 32303

### **Articles of Conversion** For "Other Business Entity"

FILED 2024 JAN 30 PH 3: 09

#### 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:  PRP Solutions, 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
(Enter state, or if a non-U.S. entity, the name of the country)
4/12/2010
4/12/2010 (date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
PRP Innovations, 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 21	day of March	2024 .
	uthorized Representative of Lim	^
Signature of Aut	thorized Representative:	Mostly _
Printed Name: Pa	aul Robert Prusinowski	Title:
Signature(s) on	behalf of Other Business Entity:	See below for required signature(s)
Signature:	Paul / way	<u> </u>
Signature:	Jan J May	
Printed Name: Pa	aul Robert Prusinowski	Title:
Signature:		
Printed Name:	·	Title:
Signature:		Title:
Printed Name:		Title:
Signature:		
Printed Name:	<del></del>	Title:
Timed Name		
Signature:		
Printed Name:		Title:
Sianaturo:		
Printed Name:		Title:
rimed Name		
If Florida Corpo		
	irman, Vice Chairman, Director, or	
If Directors or O	fficers have not been selected, an In	corporator must sign.
If Florida Cana	ral Partnership or Limited Liabili	ty Partnorshin.
Signature of one		ty tarmetsing.
_		
	<u>ed Partnership or Limited Liabili</u>	
Signatures of AL	<u>.L.</u> General Partners.	
All others:		
	uthorized person.	
···•		
Fees:		
Articles o	of Conversion:	\$25.00
Fees for	Florida Articles of Organization:	\$125.00
Certified	_	\$30.00 (Optional)
	te of Status:	\$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	2024 JAN 30 PM 3: 09
The name of the Limited Liability Company is:	SECT PARY OF STATE
PRP Innovations, LLC	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "Ll.C.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6824 Sterling Greens PL, #404	6824 Sterling Greens PL, #404
Naples, FL 34104	Naples, FL 34104
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re	red Agent. You must designate an individual or another
Paul Robert Prusinowski	
Name	
6824 Sterling Greens PL, #404	
Florida street address (P.O.	Box NOT acceptable)
Naples	FL 34104
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)

#### ARTICLE IV-

as provided for in s.817.155, F.S.

Paul Robert Prusinowski

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

<u>Title:</u> <u>Name and Address:</u>			
"AMBR" = Authorized Member			
"MGR" = Manager			
MGR	Paul Robert Prusinowski		
	6824 Sterling Greens PL, #404		
	Naples, FL 34104		
	<del>.</del>		
(Use attachment if necessary)			
·			
CLE V: Other provisions, if any.			
REQUIRED SIGNATURE: /			
KEOUKED SIGNATURE.	$\prec$ /		
18 V Math	182		
(1000)			

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)

any false information submitted in a document to the Department of State constitutes a third degree felony