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(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.	
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COVER LETTER

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TO: New Filing Section Division of Corporations

Rejected Document W23000035820

SUBJECT: Natural ProLogic, LLC (Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Berri Nelson					
	(Contact Person)	-			
Natural ProLogic, LLC					
	(Firm/Company)				
10 Fairway Drive Suite	301				
	(Address)		_		
Deerfield Beach, FL 33	3441				
	ity. State and Zip Code)				
accounting@natprolog.	com				
E-mail Address: (to be	used for future annual rep	ort notifications)			
For further informatic	on concerning this mat	ter, please call	:		
Berri Nelson		_ut (⁹⁵⁴	902-5	5053	
(Name of Conta	ct Person)		c) (Day	time Telephone Number)	•
	or the following amou a bank located in the		process	sed by this office must b	e payable in US
☐ \$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□S180.00 Filit and Certified C		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	₩ 1121.25

Mailing Address:

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

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

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 Conversion is: Natural ProLogic, LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a LLC (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, et
Las Vegas, Nevada First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country)
05/10/2016 on
 The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization Natural ProLogic, 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 along of various law has a graphy and in a graphy and with all madicable equators

- 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 30 day of July 2024	
Signature of Authorized Representative of Limit	
Signature of Authorized Representative:Printed Name: Stephen Winters	Title: President
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Printed Name: Stephen Winters	Title: President
Signature: Printed Name:	Title:
Signature:Printed Name:	
Signature:Printed Name:	Title:
Signature:Printed Name:	_ Title:
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:
All others: Signature of an authorized person.	
<u>Fees:</u>	
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

H(170Ebb 01 0		
ARTICLE I - Nan	ne:	
The name of the Li	mited Liability Compar	ny is:
Natural ProLogic, LL	С	
(Mu	st contain the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Ad	dress:	
The mailing address	s and street address of	the principal office of the Limited Liability Company is:
Principal Office A	ddress:	Mailing Address:
10 Fairway Drive		5800 Camino Del Sol
Suite 301		Unit 400
Deerfield Beach, FL	33441	Boca Raton, FL 33433
The name and the l	Florida street address of Brighton Accounting & B	f the registered agent are:
		Name
		- · - · · · · · · · · · · · · · · · · ·
	3910 Lymestone Drive	
	Florida street address	s (P.O. Box <u>NOT</u> acceptable)
	Cooper City	FL 33026
	City	Zip
liability comp registered agent statutes relating	any at the place designo and agree to act in this of the proper and com	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all plete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 605, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-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	
President	Stephen Winters
	5800 Camino Del Sol Unit 400
	Boca Raton, FL 33433
	
<u> </u>	
(Use attachment if necessary)	
,	
RTICLE V: Other provisions, if any,	
REQUIRED SIGNATURE:	
	or an authorized representative of a member
Sionature of a member of	of an authorized representative of a memori
This decompose is expected in accordar	nce with section 605,0203 (1) (b), Florida Statutes, I am aware that
This document is executed in accordate any false information submitted in a de-	nce with section 605,0203 (1) (b), Florida Statutes, I am aware that
This document is executed in accorda	nce with section 605,0203 (4) (b), Florida Statutes, I am aware that
This document is executed in accordary false information submitted in a deas provided for in s.817.155, F.S.	nce with section 605,0203 (4) (b), Florida Statutes, I am aware that
This document is executed in accordary false information submitted in a document provided for in s.817.155, F.S. Stephen Winters	nce with section 605.0203 (1) (b). Florida Statutes. I am aware that ocument to the Department of State constitutes a third degree felony
This document is executed in accordary false information submitted in a document provided for in s.817.155, F.S. Stephen Winters	Typed or printed name of signee
This document is executed in accordary false information submitted in a document as provided for in s.817.155. F.S. Stephen Winters	nce with section 605.0203 (1) (b). Florida Statutes. I am aware that ocument to the Department of State constitutes a third degree felony

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