

P 24000076123

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

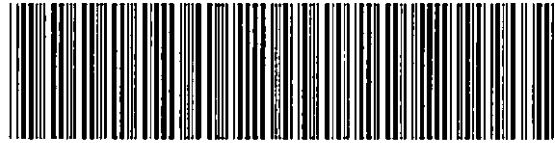
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000436738470

09/18/24--01016--018 **113.75

FILED
2024 SEP 18 AM 4:50
SECRETARY OF STATE
ALLAHASSET, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 24, 2024

PATRICK SHEPPARD
20202 QUAIL RUN DR
DUNNELLON, FL 34432 US

SUBJECT: NSUROSENA, INC.
Ref. Number: W24000133742

We have received your document for and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the business being converted must match the name that is registered with the department of state website.,

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

KAIN COSTELLO
Regulatory Specialist II
New Filing Section

Letter Number: 824A00021403

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Converting to a Florida Profit Corporation

Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.

Please return all correspondence concerning this matter to:

Patrick Sheppard

Contact Person

Neurosensa, LLC

Firm/Company

20202 Quail Run Dr.

Address

Dunnellon, Florida 34432

City, State and Zip Code

psheppard@neurosensa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patrick Sheppard at (**727**) **466-8612**

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$105.00 Filing Fees ☒ \$113.75 Filing Fees and Certificate of Status ☐ \$113.75 Filing Fees and Certified Copy ☐ \$122.50 Filing Fees, Certified Copy, and Certificate of Status

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
Converting Eligible Entity
Into
Florida Profit Corporation

The Articles of Conversion **and attached Articles of Incorporation** are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:

Neurosensa, LLC

Enter Name of the Converting Entity

2. The converting entity is a LLC

(Enter entity type. Example: limited liability company, limited partnership,
general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of Florida

(Enter state, or if a non-U.S. entity, the name of the country)

on 04/04/2023

Enter date "Converting Entity" was first organized, formed or incorporated.

3. The name of the Florida Profit Corporation as set forth in the **attached Articles of Incorporation**:

Neurosensa, INC.

Enter Name of Florida Profit Corporation

4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.

5. If not effective on the date of filing, enter the effective date: _____.

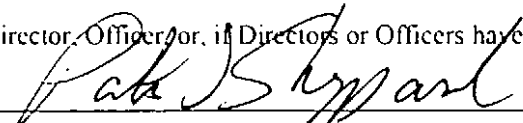
(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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.

Signed this 17th day of September, 2024.

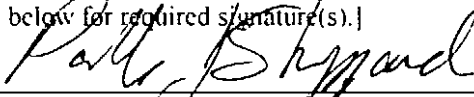
Required Signature for Florida Profit Corporation:

Signature of Director, Officer, or, if Directors or Officers have not been selected, an Incorporator:



Printed Name: Patrick Sheppard Title: CEO

Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies: [See below for required signature(s).]

Signature: 

Printed Name: Patrick Sheppard Title: Manager/Member

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

Signature: _____

Printed Name: _____ Title: _____

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.

If Florida Limited Liability Company:

Signature of a Member or Authorized Representative.

All others:

Signature of an authorized person.

Fees:

Articles of Conversion:	\$35.00
Fees for Florida Articles of Incorporation:	\$70.00
Certified Copy:	\$8.75 (Optional)
Certificate of Status:	\$8.75 (Optional)

**ARTICLES OF INCORPORATION
FOR RESULTING FLORIDA PROFIT CORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)**

ARTICLE I NAME

The name of the corporation shall be: Neurosensa, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Principal street address

Mailing address, if different is:

20202 Quail Run Dr.

Dunnellon, FL. 34432

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY and ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 10,000,000

ARTICLE V OFFICERS AND/OR DIRECTORS

Name and Title: Patrick Sheppard, CEO

Address: 20202 Quail Run Dr.

Dunnellon, FL. 34432

Name and Title: Paul Shirley, COO

Address: 4156 SW Rivers Run Way

Palm City, FL. 34990

Name and Title: Dr. John Ellis

Address: 5100 N. Brookline Ave

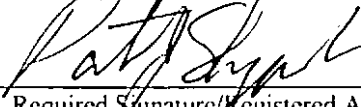
Oklahoma City, OK 73112

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Patrick Sheppard
Address: 20202 Quail Run Dr.
Dunnellon, FL. 34432

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

09/17/2024
Date

FILED
2024 SEP 18 AM 4:50
CLERK OF STATE
TALLAHASSEE, FLORIDA