

L22000422171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

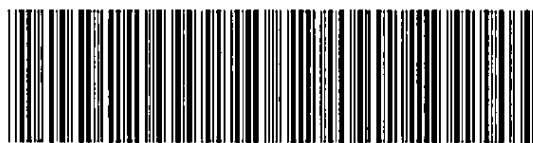
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400388837124

S. CHATHAM  
SEP 30 2022

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
22 SEP 29 PM 3:30

RECEIVED  
2022 SEP 29 PM 2:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Rayson Partners, 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:

Sharon Mason Ferraro

(Contact Person)

Snell & Wilmer LLP

(Firm/Company)

400 E Van Buren Suite 1900

(Address)

Phoenix, Arizona 85004

(City, State and Zip Code)

rayrivera@eregcorp.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

Sharon Mason Ferraro

(Name of Contact Person)

at ( 602 ) 382-6872

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

☐ \$150.00 Filing Fees  
(\$25 for Conversion  
& \$125 for Articles  
of Organization)

☐ \$155.00 Filing Fees  
and Certificate of  
Status

☐ \$180.00 Filing Fees  
and Certified Copy

☒ \$185.00 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

**Incorporating Services, Ltd.**

1540 Glenway Drive  
Tallahassee, FL 32301  
850.656.7956  
Fax: 850.656.7953  
www.incserv.com  
e-mail: accounting@incserv.com

**ORDER FORM**

**TO:** Florida Department of State  
The Centre of Tallahassee  
2415 North Monroe Street, Suite 810  
Tallahassee, FL 32303  
corphelp@dos.myflorida.com  
850-245-6051

**FROM:** Melissa Moreau  
mmoreau@incserv.com  
850.656.7953

**REQUEST DATE** 09/29/2022

**PRIORITY** Routine

**OUR REF. # (Order ID#)** Devon

**ORDER ENTITY**

**Rayson Partners, LLC**

**PLEASE PERFORM THE FOLLOWING SERVICES:**

Rayson Partners, LLC

Please file the attached conversion and subsequent articles of organization and provide a certified copy and certificate of status as evidence.

**NOTES:**

\$185.00 Authorized

**RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATE  
22 SEP 29 PM 3:30

**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:  
RaySon Partners, Inc.

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a corporation  
(Enter entity type. Example: corporation, 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 03/22/2005  
(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:  
RaySon Partners, 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.

Signed this 28th day of September 20 22.

**Signature of Authorized Representative of Limited Liability Company:**

Signature of Authorized Representative: [Signature]  
Printed Name: Raymond A. Rivera Title: Manager

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s)]**

Signature: [Signature]  
Printed Name: Raymond A. Rivera Title: President

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida Corporation:**

Signature of Chairman, Vice Chairman, Director, or Officer.  
If Directors or Officers have not been selected, an Incorporator must sign.

**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.

**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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATE  
22 SEP 29 PM 3:30

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

RaySon Partners, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

#### Principal Office Address:

8380 BAYMEADOWS ROAD, STE. 17  
JACKSONVILLE, FL 32256

#### Mailing Address:

8380 BAYMEADOWS ROAD, STE. 17  
JACKSONVILLE, FL 32256

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Raymond A. Rivera

Name

8380 BAYMEADOWS ROAD, STE. 17

Florida street address (P.O. Box **NOT** acceptable)

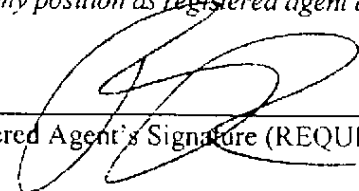
JACKSONVILLE

FL 32256

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)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2008 JUN 29 PM 3:30

**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

**Name and Address:**

Raymond A. Rivera

8380 BAYMEADOWS ROAD, STE. 17

JACKSONVILLE, FL 32256

MGR

Sonny J. Downey

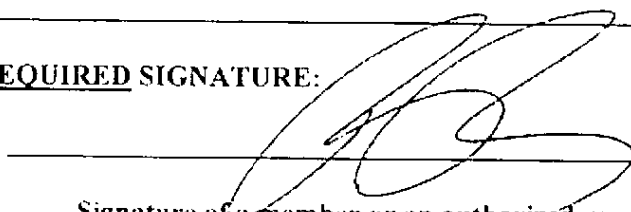
8380 BAYMEADOWS ROAD, STE. 17

JACKSONVILLE, FL 32256

(Use attachment if necessary)

**ARTICLE V: Other provisions, if any.  
Officers. Please see attachment.**

**REQUIRED SIGNATURE:**



**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.

Raymond A. Rivera

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)**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
22 SEP 29 PM 3:30

ATTACHMENT TO ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY  
COMPANY

**Name of Limited Liability Company:** RaySon Partners, LLC

**ARTICLE V:** Other Provisions, if any.

Officers.

The name, title and address of each person who holds an office with the Limited Liability Company:

Sonny J. Downey - President  
8380 Baymeadows Road, Ste. 17  
Jacksonville, FL 32256

Raymond A. Rivera – Chief Executive Officer  
8380 Baymeadows Road, Ste. 17  
Jacksonville, FL 32256

Nanci J. Soriano – Chief Operating Officer  
8380 Baymeadows Road, Ste. 17  
Jacksonville, FL 32256

Jeanna M. Sullivan – Other Officer  
8380 Baymeadows Road, Ste. 17  
Jacksonville, FL 32256

Elizabeth C. Alicea– Other Officer  
8380 Baymeadows Road, Ste. 17  
Jacksonville, FL 32256

Ingrid Freeman – Other Officer  
8380 Baymeadows Road, Ste. 17  
Jacksonville, FL 32256

Dan Duffy– Other Officer  
8380 Baymeadows Road, Ste. 17  
Jacksonville, FL 32256

Rick Haase – Other Officer  
8380 Baymeadows Road, Ste. 17  
Jacksonville, FL 32256

David Dickey – Other Officer  
8380 Baymeadows Road, Ste. 17  
Jacksonville, FL 32256