N1800010594

(Requestor's Name)				
(Address)				
(Ad	ldress)			
(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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Office Use Only

COVER LETTER

TO:

Charter Section

Division of Corporations

SUBJECT: Scholastic Chess. Name of Resultin	Drg
Name of Resultin	g Florida Profit Corporation
	rporation, and fees are submitted to convert an "Other Business
Please return all correspondence concerning this matter	to:
KEVIN J. Pryor Contact Person	
Scholastic Chess. Org	
17446 HENDRICKS AVE She	#/4/
JACKSONVILLE, FL 32207 City, State and Zip Code	
PRYORKEVING UAhoo. Con E-mail address: (to be used for future annual report	
For further information concerning this matter, please ca	
KEVIN Pryor at GE Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:	
\$105.00 Filing Fees	.75 Filing Fees
STREET ADDRESS: New Filings Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filings Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Certificate of Conversion
For

"Other Business Entity"

ATN. Into
Florida Profit Corporation

This Certificate of Conversion and attached Articles of Incorporation are submitted to convert the following "Other Business Entity" into a Florida Profit Corporation in accordance with s. 607.1115, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

Scholast, Chess. Org LLC
Enter Name of Other Business Entity

2. The "Other Business Entity" is a Limited liability company, limited painership, 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 Suré 30, 2017
Enter date "Other Business Entity" was first organized, formed or incorporated

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

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

SCHOLASTICCHESS ORG LICION
Enter Name of Florida Profit Corporation

5. If not effective on the date of filing, enter the effective date: October 1, 2018
(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.

Page 1 of 2

18 OCT -2 PH 2: 45

Signed	this 24 day of Septemb	er , 20 18	
Reguir	NON− red Signature for Florida Profit Corporation	<u>n:</u>	
Incorpo	ore of Chairman, Vice Chairman, Director, Off orator: KEVIN J PLYOK SLE Name: 1 Title:	12-17 1-10-10 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	n selected, an
Requir	ed Signature(s) on behalf of Other Business	Entity: [See below for required signature(s).]
Signatu	ire: Keun J. Pryen		
Printed	Name: KEVIN J. Pryor	Title: Dfficer	
Signatu			
Printed	Name: George J. Foote	~~	
Signatu	ıre:		
Printed	Name:	Title:	
Signatu	ıre;		
Printed	Name:	Title:	
Signatu	rre:		
Printed	Name:	Title:	
Signatu	ire:		
Printed	Name:	Title:	
<u>If Flori</u> Signatu	ida General Partnership or Limited Liabilit ire of one General Partner.	y Partnership:	
If Flori Signatu	ida Limited Partnership or Limited Liabilit ires of <u>ALL</u> General Partners.	y Limited Partnership:	
If Flori Signatu	ida Limited Liability Company: tre of a Member or Authorized Representative.		
All oth Signatu	ers: are of an authorized person.		\$ 50 50
Fees:			130
	Certificate of Conversion: Fees for Florida Articles of Incorporation:	\$35.00 \$70.00	, ~
	Certified Copy:	\$8.75 (Optional)	⊒k ;
	Certificate of Status:	\$8.75 (Optional)	4 .
		Page 2 of 2	

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME The name of the corporation shall be: Scholast	7c Chess. Org. Inc
ARTICLE II _PRINCIPAL OFFICE	91
Principal <u>street</u> address: 4446 HENDIUCKS.4VE	Mailing address, if different is:
Ste#141	
Jacksonville, FL 32207	
We will work towards the WA lectures CHSS1200M IN	o brosden and develop chess s A significant element of culture. is end by instruction of the public istruction, provers and conjustitive
EVENTS. This may require	receipt of donations or purchase rectly to restize this ideal.
ARTICLE V INITIAL OFFICERS AND/OR DIRECT Name and Title: KEVIN J. Propr. Officers.	
Address 8694 Etheris Chen Ter Jackson Ville, Fl32250	Address:
Name and Title: Coorse J. Foote Office Address 1605 Berwick Rost JACKSOIUILLE, FL 3220	Address:
Name and Title:Address	

Name and Title:		Name and Title:	_
Address _		Address:	_
_			_ _
Name and Title:		Name and Title:	 .
Address _		Address:	
_			<u> </u>
-			_
	REGISTERED AGENT lorida street address (P.O. Box NOT accep	otable) of the registered agent is:	
Name:	KEUIN J. Pryor		
Address:	8644 Ethons Glen Ter		1 2
	JACKSONVIlle, FL 32251	6	1 1 1 2 0CT - 2
	<u>INCORPORATOR</u> ddress of the Incorporator is:		-3
Name:	Kevin J. Pryor		** 2:
Address:	8694 Ethnis Glen	<u>Fer</u>	Ωπ V a
	Jacksonville, FL		
Effective date, if	other than the date of filing: Oct Jate is listed, the date must be specific and	2018 . (OPTIONAL) d cannot be more than five days prior or 90 days aft	ter the filing.)
Note: If the date document's effect	e inserted in this block does not meet the appetitive date on the Department of State's reco	plicable statutory filing requirements, this date will not rds.	be listed as the
certificate, I-am	familiar with and accept the appointment as	of process for the above stated corporation at the place stregistered agent and agree to act in this capacity	,
Den	Required Signature of Registered	Agent 9/26/2	2018
I submit this doc		in are true. I am aware that any false information subn	nitted in a document
	Sequired Signature of Incorp		2017
<u>/////</u>	Required Signature of Incorp	porator Dat	e ·