# 1119000011526

(Req	uestor's Name)	
(Addi	ress)	<del></del>
(Addı	ress)	
(City/	State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busi	iness Entity Nar	me)
(Doc	ument Number)	)
Certified Copies	Certificate	s of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 + Tallahassee, Florida 32301 (850) 224-8870 + 1-800-342-8062 + Fax (850) 222-1222

New Life Counselin	g and Education	nal		
Services, Inc.				
			····	
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
		Į.		Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
		į		Dissolution / Withdrawal
				Annual Report / Reinstatement
		!		Cert. Copy
		ŀ		Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
			<u></u>	Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
_				Vehicle Search
		<b>_</b>		Driving Record
Requested by: Seth	11/01/19			UCC 1 or 3 File
Name	Date	Time		UCC 11 Search
				UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

#### **COVER LETTER**

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

New Life Co	ounseling and Educational Servic	es, Inc.	
30b0lse1	(PROPOSED CORPO	RATE NAME - MUST INC	CLUDE SUFFIX)
Enclosed is an original	and one (1) copy of the Artic	les of Incorporation and	a check for:
<b>□</b> \$70.00	☐ \$78.75	□\$78.75	S87.50
Filing Fee	Filing Fee & Certificate of	Filing Fee & Certified Copy	Filing Fee, Certified Copy
	Status	& Certified Copy	& Certificate
		ADDITIONAL CO	PY REQUIRED
FROM:	Rodney G. Gregory	esq. Obo Cederc L	-Singletary
	3840 CROWNPOINT nd.	Address	a.
	Vack somille Fr	32257 ity, State & Zip	
	(904) 398 Daytime	- 0 0 1 Z- e Telephone number	
1	litigation @ON E-mail address: Yo be used for the	LLQ & ILLA QUETUM L	9+ n)

NOTE: Please provide the original and one copy of the articles.

### Certificate of Conversion For "Other Business Entity" Non 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:
New Life Counseling and Educational Services, L.L.C. 19-244458
Enter Name of Other Business Entity
2. The "Other Business Entity" is a  (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-LIS, entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
$\frac{-11/1/2019}{2019}$ 9/27/10
on Enter date "Other Business Entity" was first organized, formed or incorporated
5. 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:  Jurisdiction has not changed.
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
New Life Counseling and Educational Services, Inc.
Enter Name of Florida Profit Corporation
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.

Page 1 of 2

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Signed	thisday of	, 20	
Requir	Non red Signature for Florida Profit Corporatio	<u>n:</u>	
Signati Incorpe Printed	ure of Chairman. Vice Chairman, Director, Offorator: /s/ Cedric L. Singletary    Name: Cedric L. Singletary   Title: CEO	ficer, or, if Directors or Officers have no	t been selected, an
Requi	red Signature(s) on behalf of Other Busines:	s Entity: [See below for required signat	ure(s).}
	ure: 15/ Cedeic L. Single-		
	Cedric L. Singletary	•	
Signati	are:		
Printed	Name:	Title:	- <del></del>
Signati	ore:		
Printed	Name:	Title:	<del></del>
Signati	ıre:		<del></del>
Printed	Name:	Title:	·
Signati	are:		
Printed	Name:	Title:	
Signati	are:		· · · · · · · · · · · · · · · · · · ·
Printed	Name:	Title:	<del></del>
	ida General Partnership or Limited Liabili are of one General Partner.	ty Partnership:	19 0 (21) (21)
	ida Limited Partnership or Limited Liabilit ares of <u>ALL</u> General Partners.	y Limited Partnership:	0T 31
	ida Limited Liability Company; are of a Member or Authorized Representative		PH 3: 32
<u>All oth</u> Signate	ters: are of an authorized person.		ALE PIOA
Fees:	Certificate of Conversion: Fees for Florida Articles of Incorporation: Certified Copy: Certificate of Status:	\$35.00 \$70.00 \$8.75 (Optional) \$8.75 (Optional)	

#### ARTICLES OF INCORPORATION

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

<u>ARTICLE II</u>	PRINCIPAL OFFICE					
3630	Principal <u>street</u> address: 6 University Blvd. S.		Mailing address, if differ	ent is:		
Suit	е Л-9					
Jack	ssonville, Florida 32216					
ARTICLE III The purpose f education, ps	I PURPOSE  for which the corporation is organized is: sychiatric services, care, and mental health	to service the comm	unity with case management, su	bstance ab orida Law.	use	
				<del></del>		
		<del> </del>				<del></del>
ARTICLE IV		nner in which the dire	ectors are elected and appointed:	As stated	in the b	ylaws.
ARTICLE IV	* MANNER OF ELECTION* The ma	unner in which the dire	ectors are elected and appointed:	As stated	in the b	ylaws.
			ectors are elected and appointed:	As stated	-	ylaws.
ARTICLE IV	INITIAL OFFICERS AND/OR DIRE		Meleccio A. McCov (Tucker)	1700	-	ylaws.
ARTICLE V	INITIAL OFFICERS AND/OR DIRE	<u>ECTORS</u>	Meleccio A. McCov (Tucker)	1700	in the b	Ti =
ARTICLE 17	INITIAL OFFICERS AND/OR DIRE Cedric L. Singletary, CEO le:	ECTORS  Nome and Title	Meleccia A. McCoy (Tucker),	1700	-	ylaws.
ARTICLE 17	INTUAL OFFICERS AND/OR DIRE  le: Cedric L. Singletary, CEO  3636 University Blvd. S.	ECTORS  Nome and Title	Meleccia A. McCoy (Tucker), 3636 University Blvd. S.	1700	19 OCT 31 PH 3:	Ti =
ARTICLE V Name and Titi Address	INTUAL OFFICERS AND/OR DIRE  Cedric L. Singletary, CEO  3636 University Blvd. S.  Suite A-9  Jacksonville, Florida 32216  Frakal Goodman, COO/Secretary	ECTORS  Name and Title Address:	Meleecia A. McCoy (Tucker), 3636 University Blvd. S. Suite A-9 Jacksonville, Florida 32216	CFO:	19 OCT 31 PM	Ti =
ARTICLE V  Name and Titl  Address  Name and Titl	INTUAL OFFICERS AND/OR DIRE  Cedric L. Singletary, CEO  3636 University Blvd. S.  Suite A-9  Jacksonville, Florida 32216  Frakal Goodman, COO/Secretary	Name and Title Address: Name and Title	Meleccia A. McCoy (Tucker), 3636 University Blvd. S.  Suite A-9  Jacksonville, Florida 32216	CFO?	19 OCT 31 PH 3: 3	Ti =
ARTICLE V Name and Titi Address	INITIAL OFFICERS AND/OR DIRE  Cedric L. Singletary, CEO  3636 University Blvd. S.  Suite A-9  Jacksonville, Florida 32216  Le: Erakal Goodman. COO/Secretary	ECTORS  Name and Title Address:	Meleecia A. McCoy (Tucker), 3636 University Blvd. S. Suite A-9 Jacksonville, Florida 32216	CFO?	19 OCT 31 PH 3: 3	T1 ====================================
ARTICLE V  Name and Titl  Address  Name and Titl	INTUAL OFFICERS AND/OR DIRE  Cedric L. Singletary, CEO  3636 University Blvd. S.  Suite A-9  Jacksonville, Florida 32216  Erakal Goodman. COO/Scoretary  3636 University Blvd. S.	Name and Title Address: Name and Title	Meleccia A. McCoy (Tucker), 3636 University Blvd. S.  Suite A-9  Jacksonville, Florida 32216	CFO:	19 OCT 31 PH 3: 3	Ti =
Name and Title Address Name and Title Address	INTUAL OFFICERS AND/OR DIRE  Cedric L. Singletary, CEO  3636 University Blvd. S.  Suite A-9  Jacksonville, Florida 32216  Erakal Goodman. COO/Secretary  3636 University Blvd. S.  Suite A-9	Name and Title   Address:	Meleccia A. McCoy (Tucker), 3636 University Blvd. S. Suite A-9 Jacksonville, Florida 32216	CFO TO TO THE CONTROL OF THE CONTROL	19 OCT 31 PH 3: 3	T1 ====================================

Name and Title:		Name and Title:	_
Address		Address:	_
			_
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***			_
Name and Title:		Name and Title:	_
Address		Address:	_
	<del>-</del>		_
			_
	<u>EGISTERED AGENT</u> ida street address (P.O. Box NOT accept	table) of the registered agent is:	
Name:	Rodney G. Gregory, Esqui		
Address:	3840 Crown Point Road, S	Ste B	19 0
Address.	Jacksonville, Florida 3225	<del></del> 57	F1L
	<u> </u>		
	CORPORATOR	. · · · · · · · · · · · · · · · · · · ·	3 7
	ess of the Incorporator is:  Cedric L. Singletary		10 14 3: 32
Name:	3636 University Blvd. S., Suite	<del></del>	;;;;; 2 ;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;
Address:		<del></del>	
	Jacksonville, Florida 322	10	
ARTICLE VIII E	FFECTIVE DATE: November than the date of filing:	er 1, 2019 (OPTIONAL)	
(If an effective dat	e is listed, the date must be specific and	cannot be more than five days prior or 90 days after	er the filing.)
N . 183 /		Park I are marked to the control of	an line ad on a shar
	e date on the Department of State's record	dicable statutory filing requirements, this date will not be ds.	e fisted as the
		f process for the above stated corporation at the place	
certificate Lom fan	idior with and access the appointment as:	registered agent and agree to act in this capacity	i designatea in this
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	W/X/Pru		119
7.0	Required Signature of Registered A	Agent Date	<del></del> /
A Submit this docum	ent and affirm that the facts stated herein f State constitutes a third degree felony as	i are true. I am aware that any Jaise information subm	itted in a document
-	<u> </u>		Q
	Required Signature of Incorps	Date	_1