# N2000006937

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
☐ PICK-UP ☐ WAIT ☐ MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE
TALL ASIASSEE, FL

N CULLIG 19
JUN 2 3 2021

W20-64720

# **COVER LETTER**

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

UBJECT:	Fourth and Go			
	(PROPOSED CORP	ORATE NAME - MUST IN	CLUDE SUFFIX)	<del></del>
			,	
				Certificate of Conversion
Enclosed is an original a	and one (1) copy of the Ar	ticles of Incorporation and	a check for: \$105	and Foes for Florida Articles of Inacorporation
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate	macox piration
		ADDITIONAL CO	PY REQUIRED	
				J
FROM:	Erin Tr	me (Printed or typed)	-	
	4271 Chelsea	. Harbur Or W		
		Address		
	Jacksonville	FU 32224 City, State & Zip	_	
	_	5 7 3 2		
		ime Telephone number	-	
	ENTrac	45@ 4mail.con	n	

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

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



### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 24, 2020

ERIN TRACY 4271 CHELSEA HARBOR DR W JACKSONVILLE, FL 32224

SUBJECT: FOURTH AND GOLD INC.

Ref. Number: W20000064720

We have received your document for FOURTH AND GOLD INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Letter Number: 420A00012546

DANIEL L O'KEEFE Regulatory Specialist II

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FILED

Certificate of Conversion

1 6 F 30

FUI

"Other Business Entity"

Into

Florida Profit Corporation
Non Profit

2020 JUN 26 PM 4: 16 SECRETARY OF STATE TALLAHASSEE, FL

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:
Fourth and Gold LLC
Enter Name of Other Business Entity
2. The "Other Business Entity" is a
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 9/5/17
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:
4. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:
Fourth and Gold Inc.
Enter Name of Florida Profit Corporation  Non Profit
5. If not effective on the date of filing, enter the effective date: 6 15 20
(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.

SECRETARY OF STATE

Signed this 10th day of June	, 20 20 .
Required Signature for Florida Profit Corporation:	
Signature of Chairman, Vice Chairman, Director, Office Incorporator:  Printed Name: Erin Tracy Title: Manage	er, or, if Directors or Officers have not been selected, an
Required Signature(s) on behalf of Other Business E	· · · · · ·
Signature:	
Printed Name: Erin Tracy	Title: Manager   Founder
Signature:	· · · · · · · · · · · · · · · · · · ·
Printed Name:	
Signature:	· .
Printed Name:	
Signature:	· · · · · · · · · · · · · · · · · · ·
Printed Name:	_Title:
Signature:	
Printed Name:	Title:
Signature:	[ ]
Printed Name:	_ Title:
If Florida General Partnership or Limited Liability I Signature of one General Partner.	Partnership:
If Florida Limited Partnership or Limited Liability I Signatures of <u>ALL</u> General Partners.	imited Partnership:
If Florida Limited Liability Company: Signature of a Member or Authorized Representative.	
All others: Signature of an authorized person.	,
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)

The name of the corporation shall be: Fourth as	nd Gold Inc.
ARTICLE II PRINCIPAL OFFICE	
Principal <u>street</u> address: 4271 Chelsea Harbor Dr W	Mailing address, if different is:  P.O. Box 50104
Jacksonville, FL	Jackson ville Beach, FL
32224	32240
for charitable and scientific purpose the making of distributions to organ organizations under section 501(c). the curresponding section of any for	The corporation is organized exclusively ses including for such purposes, inizations that qualify as exempt  (3) of the Internal Revenue Cale, or interfederal tax code  er in which the directors are elected and appointed: provided in the
Address 4271 (helpen Hurbor Dr W	Name and Title: Linda Forde, Director: 5 F.  Address: 1315 Sparkleberry C+ 77 F.
Jacksonville, FL 32024  Name and Title: Ashley Smith, Director  Address  13418 Foxbaven Dr N  Jacksonville, FL  32224	St. John's, Flurida 32259
Name and Title: Michael Tracy Director  Address 294 Gleneagles Dr  Orange Park, FL  32073	Name and Title:

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Name and Title	· .	Managard Title.				
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Address		Address:	<del></del>	_		
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Name and Title:		Name and Title:		_		
Address .		Address:	·	<del></del>	,	
·	,			<b>,-</b>		
•				<del></del>		
ARTICLE VI The name and F	<u>REGISTERED AGENT</u> Torida street address (P.O. Box NOT	acceptable) of the registered agent is:				
Name:	Erin Tracy	acceptance) of the registered agent is:		တ	2	
		(V 11)		TALLAHVS	2020 JUN 26	get la
Address:	4271 Chelsea Harbor Jacksonville, FL 32	201			둘	
	Jacksonville, FC 32	<del>79</del> 4		TALLAHVISSEE, I	26	Î
ARTICLE VII	INCORPORATOR				P	3
<del></del>	ddress of the Incorporator is:			ST.	PH 4: 17	'
Name:	Erin Tracy	•		TATE	7	
Address:	4271 Chelsea Harbu	x Dr W				
		2204				
	Jack 201/4/1/6 1 0 0	<del></del>				
	EFFECTIVE DATE; other than the date of filing:	OPTIO	NIAT X			
	late is listed, the date must be specif		NAL) lys prior or 90 days afte	r the filio	g.)	
Note: If the date	inserted in this block does not meet the	he applicable statutory filing requirer	nents, this date will not b	e listed as	the	
document 2 ettec	tive date on the Department of State's	s records.				
Having been na	med as registered agent to accept ser	vice of process for the above stated	corporation at the place	e designate	ed in this	
certificate, I am j	familiar south and accept the appointm	ent as registered agent and agree to a	ect in this capacity			
			6/10/20	20		
	Required Signature of Regist	tcred Agent	Date	<del></del>		
l submit this doci	ument and affirm that the facts stated	herein are true. I am aware that any	false information submi	itted in a d	ocument	,
to the Departmen	ut of State constitutes a third degree fe	lony as provided for in s.817.155, F.S				
			6/10/20 Date	20		
	Required Signature of I	ncorporator	Date			