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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Jacksonville Bail Agents Association INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: Jacqueline Hill

Name (Printed or typed)

332 e adams street

Address

Jacksonville FL 32202

City, State & Zip

9045160098

Daytime Telephone number

Jbaaflorida@gmail.com

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

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

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

ARTICLE I NAME

The name of the corporation shall be: Jacksonville Bail Agents Association INC

ARTICLE II PRINCIPAL OFFICE

Principal <u>street</u> address: <u>332 e adams street</u> <u>Jacksonville FL 32202</u>	Mailing address, if different is: <u>PO box 2724</u> <u>Jacksonville FL 32203</u>
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ARTICLE III PURPOSE

The purpose for which the corporation is organized is: A non for profit association regarding bail bonds, establishing and buildi
relationships with the local jails, community, legal entities and fellow agents.

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected and appointed: Vote

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>President Jacqueline Hill</u> Address: <u>P.O. Box 2724</u> <u>Jacksonville, FL 32203</u>	Name and Title: <u>Vice president, Carmen Ress</u> Address: <u>PO Box 2724</u> <u>Jacksonville, FL 32203</u>
Name and Title: <u>Secretary, Brandie Zweifel</u> Address: <u>PO Box 2724</u> <u>Jacksonville, FL 32203</u>	Name and Title: <u>Secretary Rebecca Allen</u> Address: <u>PO Box 2724</u> <u>Jacksonville, FL 32203</u>
Name and Title: <u>Treasurer, Chris Napoli</u> Address: <u>PO Box 2724</u> <u>Jacksonville, FL 32203</u>	Name and Title: <u>Sergeant of arms, Samuel Owens</u> Address: <u>PO Box 2724</u> <u>Jacksonville, FL 32203</u>

TALLAHASSEE, FLORIDA
SECRETARY OF STATE
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Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Jacqueline Hill
Address: 332 e adams steet
Jacksonville FL 32202

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Jacqueline Hill
Address: 332 e adams street
Jacksonville FL 32202

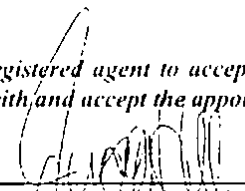
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: January 24th 2023. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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.

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

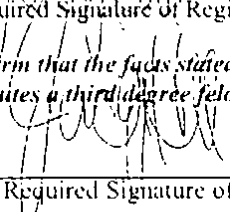


Required Signature of Registered Agent

January 24 2023

Date

I submit this document and affirm that the facts stated herein are true. 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.



Required Signature of Incorporator

January 24 2023

Date


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TALLAHASSEE, FL 32307

N23000000730

Affidavit:

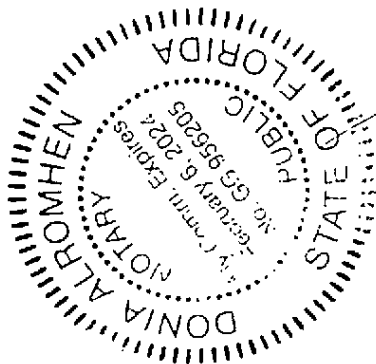
I, Jacqueline Hill representative of Jacksonville Bail Agents Association affirm that when I filed the LLC for Jacksonville Bail Agents Association it was in error at which I was informed by the department of state the only way to file it as a non-profit would be to dissolve the LLC and refile it as a non-profit and we will not file for Revocation of dissolution.

Please accept this explanation as to allow Jacksonville Bail Agents Association INC not for profit to use the above listed name.


Jacqueline Hill
(954) 651-5223

Date: January 24, 2023

Signed and sworn to before me on 1/24/23 (date) by Jacqueline Hill (name of person making statement). This signature was acknowledged before me on 1/24/23 (date) by Donna AL Roshko (name of person whose signature is acknowledged).



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TALLAHASSEE, FLORIDA

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