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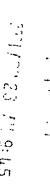
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ROBINSON COLLINS

ATTORNEYS AT LAW 1604 STOCKTON STREET JACKSONVILLE, FLORIDA 32204

KRISTOPHER D. ROBINSON kris@robinsoncollins.com

F. SUSANNAH COLLINS susannah@robinsoncollins.com

TELEPHONE (904) 483-3857 FACSIMILE (904) 483-3853

www.robinsoncollins.com

April 21, 2021

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: J. Carter Enterprises. Ltd. conversion to J. Carter Enterprises, LLC

Dear Sir or Madam:

Enclosed for filing, please find the Cover Letter and the Articles of Conversion for Other Business Entity to a Florida Limited Liability Company and Articles of Organization for the new LLC. J. Carter Enterprises, LLC. Finally, we are including a check in the amount of \$150.00 for Articles of Conversion and the Articles of Organization.

Thank you for your prompt attention to this matter. If you have any questions, please do not hesitate to contact our office.

Sincerely,

Kristopher D. Robinson

KDR:as

Enclosures

COVER LETTER

TO:	New Filing S Division of C						
SIIR	JECT: _J. Carter	Enterprises, LLC					
SOD	EC1	(Name of Res	ulting	g Florida Lin	ited Con	npany)	
						d fees are submitted to convectordance with s. 605.1045, I	
Pleas	e return all corre	espondence concernin	g thi:	s matter to:			
Kristo	opher D. Robinso	n					· 1
		(Contact Person)			_		7.
Robin	nson Collins, PL						. ა
		(Firm/Company)			_		era.
1604	Stockton Street						. 0
_		(Address)			_		
Jacks	sonville, FL 32204	‡					TC .
	((City, State and Zip Code)					
kris@	robinsoncollins.c	com					
E-	mail Address: (to b	e used for future annual re	port n	otifications)	_		
For fi	urther informati	on concerning this ma	tter,	please call:			
Kristo	pher D. Robinso	п	at ((904	483-	3857	
	(Name of Conta	ict Person)		(Area Code	e) (Day	rtime Telephone Number)	
		or the following amou a bank located in the	-		process	sed by this office must be pay	able in US
(\$25 f	50.00 Filing Fees or Conversion 5 for Articles anization)	S155.00 Filing Fees and Certificate of Status		\$180.00 Filin I Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7			New I Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> 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 J. Carter Enterprises, Ltd.	is:
(Enter Name of Other Business Entity)	
2. The "Other Business Entity" is a Florida limited partnership A000 0000 914 (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business tri	
	ust, etc.)
First organized, formed or incorporated under the laws of	⁄)
6/2/2000	
on (date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organiza	ition:
J. Carter Enterprises, 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 a document's effective date on the Department of State's records.	s the
5. The plan of conversion has been approved in accordance with all applicable statutes.	
6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amo	unt to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.

Signed this 21st day of April	20_21
Signature of Authorized Representative of Lim	ited Liability Company:
Signature of Authorized Representative: 1/10 Printed Name: Vicki A. Carter	ki ann Carter Title: Manager
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s)]
Signature: Vicki Onn Conten Printed Name: Vicki A. Carter	
Printed Name: Vicki A. Carter	Title: Pres. of Sole General Partner
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Title:
Signature:Printed Name:	Tid
rimed Name.	Title.
If Florida Corporation:	0.67
Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In-	
	,
<u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner.	ty Partnership:
signature of one General Latther.	
<u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	ty Limited Partnership:
All others:	
Signature of an authorized person.	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy: Certificate of Status:	\$30.00 (Optional) \$5.00 (Optional)
Certificate of Status.	φοίου (Optionar)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

J. Carter Enterprises, Lt	С					
		ability Company, "L.L.C.," or "LLC.")	-			
ARTICLE II - Addre	200					
		e principal office of the Limited Liability (Comnany i			
		a principal critical and Elimited Elimity	ompuny .			
Principal Office Add	ress:	Mailing Address:				
		3117 Sebring Court				
3117 Sebring Court		3117 Sebring Court				
	204	Jacksonville, Florida 32204	-			
Jacksonville, Florida 322 ARTICLE III - Regis (The Limited Liability Compa	stered Agent, Registern to the state of the					
Jacksonville, Florida 322 ARTICLE III - Regis (The Limited Liability Compatusiness entity with an active) The name and the Flori	stered Agent, Registerny cannot serve as its own Fee Florida registration.)	Jacksonville, Florida 32204 ered Office, & Registered Agent's Signat	ure: <u> </u>			
Jacksonville, Florida 322 ARTICLE III - Regis (The Limited Liability Compature business entity with an active) The name and the Flori	stered Agent, Registerny cannot serve as its own Ferroida registration.) Ida street address of tobinson Collins, PL	Jacksonville, Florida 32204 ered Office, & Registered Agent's Signat Registered Agent. You must designate an individual or an the registered agent are:	ture:			
Jacksonville, Florida 322 ARTICLE III - Regis (The Limited Liability Compature business entity with an active) The name and the Flori	stered Agent, Registerny cannot serve as its own Ferroida registration.) Ida street address of tobinson Collins, PL	Jacksonville, Florida 32204 ered Office, & Registered Agent's Signat Registered Agent. You must designate an individual or an	ture:			
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ARTICLE III - Regis (The Limited Liability Compatibusiness entity with an active) The name and the Floring Ro	stered Agent, Registerny cannot serve as its own Fee Florida registration.) Tida street address of tobinson Collins, PL Note Stockton Street	Jacksonville, Florida 32204 ered Office, & Registered Agent's Signat Registered Agent. You must designate an individual or an the registered agent are:	ture: other			

egistered agent and agree to act in this capacity. I further agree to comply with the provisions of a 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)

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The name and address of each person authorized to manage and control the Limited Liability Company:

	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Madd A. O. A.
MGR	Vicki A. Carter
	3117 Sebring Court
	Jacksonville, Florida 32204
	
(Use attachment if necessary)	
(minerimient ti necessary)	
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CLE V: Other provisions, if any.	
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CLE V: Other provisions, if any. REQUIRED SIGNATURE:	ki Ann Carter
CLE V: Other provisions, if any. REQUIRED SIGNATURE:	ki ann Carter
CLE V: Other provisions, if any. REQUIRED SIGNATURE:	
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware th
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document of the submitted in a	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware th
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes. I am aware the nent to the Department of State constitutes a third degree felo
REQUIRED SIGNATURE: Signature of a member or a This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	

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)