# P24000017584

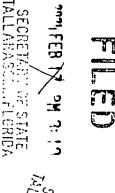
(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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#### **COVER LETTER**

TO: New Filing Section Division of Corporations					
SUBJECT: JACKSONVILLE 95E Name of	RS LLC Resulting Florida Profit	Corporation	_		
The enclosed Articles of Conversion, Articles o entity into a "Florida Profit Corporation" in acc			the follo	owing o	eligible
Please return all correspondence concerning this	s matter to:				
KEVIN WATERS					
Contact Person					
JACKSONVILLE 95ERS LLC					
Firm/Company	-				
212 N. LAURA STREET			TA.	ž	
Address			ECR LLA	1. 1.	إطاعت
JACKSONVILLE, FL 32202			#ACCE	maj EEB !'.	# H
City, State and Zip Cod	e			.) ⊒ <b>K</b>	
E-mail address: (to be used for future annual	5ER.COM ual report notification)		STATE	ر بر بر بر	
For further information concerning this matter,	please call:				
KEVIN WATERS		5-7075	_		
Name of Contact Person	Area Code and	l Daytime Telephone Nu	mber		
Enclosed is a check for the following amount:					
□ \$105.00 Filing Fees □ \$113.75 Filing Fees and Certificate of Status	■\$113.75 Filing Fees and Certified Copy	□\$122.50 Filing Fees, Certified Copy, and Certificate of Status			

## Mailing Address:

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

## **Street Address:**

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

# Articles of Conversion For Converting Eligible Entity Into Florida Profit Corporation

The Articles of Conversion <u>and attached Articles of Incorporation</u> are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion i	s:		
JACKSONVILLE 95ERS LLC			
Enter Name of the Converting Entity			
2. The converting entity is a LIMITED LIABILITY COMPANY  (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-U.S. entity, the name of the country)			
on 04/04/2023			
Enter date "Converting Entity" was first organized, formed or incorporated.			
3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation</u> JACKSONVILLE 95ERS CORPORATION  Enter Name of Florida Profit Corporation  4. This conversion was approved by the eligible converting entity in accordance with this chapter and current/organic jurisdiction.  5. If not effective on the date of filing, enter the effective date: 12/29/2023	nd the la		
(The effective date: Cannot be prior to nor more than 90 days after the date this document is Department of State.)	nied by	tne rie	orida
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the listed as the document's effective date on the Department of State's records.	ECRETA	willignot	be
Document # 123000168583	OF AF STATE	) K	H

Certified Copy: Certificate of Status:

Signed	this 29TH	day ofD[	CEMBER		,	20 <u>23</u>	·		
Requir	red Signature	for Florida Pi	ofit Corporation	<u>ı:</u>					
Signatu	re of Director		Directors or Offic		not been sel	ected, an Ind	corporator:		
	KEVIN		Title:		_ :o				
Requir	red Signature	s) on behalf o	f Converting Flo	rida partı	nerships, li	mited partr	nerships, a	nd limited i	iability
			d signature(s).]				•		
Signati	Ire:	3291454			<del> </del>			-	
Printed	KEVI Name-pocusion	N WATERS		Title:	Owner			_	
Signati	72)4							-	
Printed	2 4 4 4	nh:111:		Title:	Owner		<del></del>	-	
Signati	are: CCAF9CBS	746243A .						-	
Printed	Scott Name:	Foster		Title:	Owner		_	-	
Signati	102380E45							-	
Printed	PALAGET	SOCIULA		Title:	Owner			-	
Signati	ıre:							-	
Printed	l Name:			Title:				-	
Signati	ıre:							-	
Printed	l Name:			Title:				-	
	rida General P ure of one Gen		Limited Liabilit	y Partner	ship:				
	i <b>da Limited P</b> ures of <u>ALL</u> G		<u>Limited Liabilit</u>	y Limited	Partnersh	iip:			
	rida Limited L ure of a Membe		ed Representative						
All oth Signati	ners: ure of an autho	rized person.							
Fees:				63.5.60					
	Articles of Co Fees for Flor		Incorporation:	\$35.00 \$70.00					

\$8.75 (Optional) \$8.75 (Optional)

# ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I	NAME	25500 000	PODATION
The name of t	the corporation shall be: JACKSONVILLE	95ERS COR	PORATION
ARTICLE I	PRINCIPAL OFFICE		
	place of business/mailing address is:		
	Principal street address		Mailing address, if different is:
212 N. LA	URA STREET	same	
JACKSON	IVILLE, FL 32202		
ARTICLE I	II PURPOSE  for which the corporation is organized is:		
	onal Basketball Team.		
We partici	pate in the The Basketball League.		
			<del></del>
ARTICLE I	f shares of stock is:		
ARTICLE	V OFFICERS AND/OR DIRECTORS		
Name and Ti	tle: AMBR- SCOTT FOSTER	Name and Tit	ele: OWNER/CEO- KEVIN WATERS
Address:	212 N. LAURA STREET	Address:	212 N. LAURA STREET
	JACKSONVILLE, FL 32202		JACKSONVILLE, FL 32202
Name and Ti	tle: AMBR- JOHN PHILLIPS	Name and Tit	ile:
Address:	212 N. LAURA STREET	Address:	
	JACKSONVILLE, FL 32202		
Name and Ti	tic: AMBR- DWANE JOSHUA	Name and Tit	tle:
Address:	212 N. LAURA STREET	Address:	
	JACKSONVILLE, FL 32202		

ARTICL	LE VI <u>REGISTERED AGENT</u>		
The name	e and Florida street address (P.O. Box NOT acceptate	e) of the registered agent is:	
Name:	NICOLE PHOENIX		
Address:	7945 103RD ST STE 16		
	JACKSONVILLE FL 32210		
*****	***************************************	*******	
	een named as registered agent to accept service of pro ficate, I am familiar with and accept the appointment (	cess for the above stated corporation at the place designated s registered agent and agree to act in this capacity	in
TE	dans	12/29/2023	
	Required Signature/Registered Agent	Date	

SECREDATION STATE



Department of State / Division of Corporations / Search Records / Search by Entity Name /

## **Detail by Entity Name**

Florida Limited Liability Company JACKSONVILLE 95ERS LLC

#### Filing Information

**Document Number** 

L23000168583

FEI/EIN Number

NONE

**Date Filed** 

04/04/2023

Effective Date

04/04/2023

State

FL

Status

**ACTIVE** 

#### Principal Address

8182 CARAVELLE DR JACKSONVILLE, FL 32244

#### Mailing Address

8182 CARAVELLE DR JACKSONVILLE, FL 32244

#### Registered Agent Name & Address

EASTON, JAMES 7061 OLD KINGS RD

**APT 307** 

JACKSONVILLE, FL 32217

#### Authorized Person(s) Detail

Name & Address

Title MGR

WATERS, KEVIN D 212 NORHT LAURA STREET JACKSONVILLE, FL 32202

#### **Annual Reports**

No Annual Reports Filed

#### **Document Images**

04/04/2023 - Florida Limited Liability

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SECRETATION STATE

TO

**New Filing Section** 

Division of Corporations

TO:

#### **COVER LETTER**

SUBJECT: JACK	SONVILLE 95E	RS <u>LL</u> C			
<del></del>	Name of	Resulting Florida Profit	Corporation	•	
	f Conversion, Articles of ofit Corporation" in according		s are submitted to convert to 333 & 607.0202, F.S.	the following	eligible
Please return all corresp	ondence concerning this	matter to:			
KEVIN WATER	RS				
	Contact Person				
JACKSONVILL	E 95ERS LLC				
	Firm/Company				
212 N. LAURA	STREET				
-	Address				
<u>JACKSONVILLI</u>					
	City, State and Zip Code				
KWATERS@JA	ACKSONVILLE9 o be used for future annu	5ER.COM			
	concerning this matter,	please call:			
KEVIN WATER			5-7075		
Name of Co	ontact Person	Area Code and	d Daytime Telephone Num	ıber	
Enclosed is a check for	the following amount:			≓ .a	
□ \$105.00 Filing Fees	□\$113.75 Filing Fees and Certificate of Status	■\$113.75 Filing Fees and Certified Copy	□\$122.50 Filing Fees, Certified Copy, and Certificate of Status	SECRETALL ALLAHASSI	
Mailing Addr			Address:	- 변화 <b>글</b>	(comment)
New Filing Se Division of Co			Filing Section ion of Corporations	i [ - ]	
P.O. Box 632	•		Centre of Tallahassee	TATE	
Tallahassee, F		2415	N. Monroe Street, Suite	810	
		Tallah	nassee, FL 32303		

# Articles of Conversion For Converting Eligible Entity Into Florida Profit Corporation

The Articles of Conversion and attached Articles of Incorporation are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

1 The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:
JACKSONVILLE 95ERS LLC
Enter Name of the Converting Entity
2. The converting entity is a LIMITED LIABILITY COMPANY  (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-U.S. entity, the name of the country)
on 04/04/2023
Enter date "Converting Entity" was first organized, formed or incorporated.
3. The name of the Florida Profit Corporation as set forth in the attached Articles of Incorporation:  JACKSONVILLE 95ERS CORPORATION  Enter Name of Florida Profit Corporation  4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.
5. If not effective on the date of filing, enter the effective date: 12/29/2023  (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.
Document # L3000168583

Signed this <u>29TH</u> day of <u>D</u>	ECEMBER	, 20 <u>23</u>	
Required Signature for Florida P	rofit Corporation:	<u>1:</u>	
Signature of Director, Officer, or, if	Directors or Office	cers have not been selected, an Incorporator:	
400			
KEVIN WATERS Printed Name:	Title:	Owner/CEO	
Printed Name:	Title:		
Required Signature(s) on behalf o	of Converting Flor	rida partnerships, limited partnerships, and limited liability	Y
companies: [See below for require	d signature(s).]		
Signature:			
C8001AA83291454			
Printed Name: KEVIN WATERS		Title: Owner	
Signature: Ch			
John Phillips			
Printed Name: Ormstonery:		Title: Owner	
Signature:			
CCAF9C95748243A			
Printed Name:		Title:	
Signature:			
DWANE JOSHUA			
Printed Name:		Title: Owner	
C'			
Signature:		<del></del>	
Printed Name:		Title:	
8:			
Signature:			
Printed Name:		Title:	
remails Committee and Designation	. T IIA. 3 T I. LIIIA	n n	
<u>If Florida General Partnership or</u> Signature of one General Partner.	· Limited Liability	y Partnersnip:	
If Florida Limited Partnership or		y Limited Partnership:	
Signatures of ALL General Partner	S.		
If Florida Limited Liability Com	pany:		
Signature of a Member or Authoriz	ed Representative.		
All others:		•	
Signature of an authorized person.			
Fees: Articles of Conversion:		\$35.00	
Fees for Florida Articles of	Incorporation:	\$70.00	
Certified Copy:	•	\$8.75 (Optional)	
Certificate of Status:		\$8.75 (Optional)	

### ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of	the corporation shall be: JACKSONVILLE	95ERS CORPORA	TION
ARTICLE I			
i ne principal	place of business/mailing address is:		
	Principal street address	Mailin	g address, if different is:
212 N. LA	AURA STREET	same	
JACKSOI	NVILLE, FL 32202		
	for which the corporation is organized is:		
A Professi	onal Basketball Team.		
We partici	pate in the The Basketball League.		
			<del></del>
ARTICLE .	IV SHARES 100 of shares of stock is:		
ARTICLE		,	
Name and T	itle:AMBR- SCOTT FOSTER	Name and Title: <u>OW</u>	VER/CEO- KEVIN WATERS
Address:	212 N. LAURA STREET	Address: 212 N	N. LAURA STREET
	JACKSONVILLE, FL 32202	JACK	SONVILLE, FL 32202 3
Name and T	itle: AMBR- JOHN PHILLIPS	Name and Title:	FER CRET
	212 N. LAURA STREET		22 -
Address:	212 N. LAURA STREET	Address:	2 2
	JACKSONVILLE, FL 32202	<del></del>	
Name and T	itle: AMBR- DWANE JOSHUA	Name and Title:	
Address:	212 N. LAURA STREET	Address:	
	JACKSONVILLE, FL 32202		

ARTICI The name	LE VI REGISTERED AGENT e and Florida street address (P.O. Box NOT acceptable	of the registered agent is:	
Name:	NICOLE PHOENIX		
Address:	7945 103RD ST STE 16		
	JACKSONVILLE FL 32210		
********* Havine b	**************************************	**************************************	ted in
-	ficate, I am familiar with and accept the appointment as		
TE	dans	12/29/2023	
	Required Signature/Registered Agent	Date	

SECRETALL OF STATE



Department of State / Division of Corporations / Search Records / Search by Entity Name /

# **Detail by Entity Name**

Florida Limited Liability Company JACKSONVILLE 95ERS LLC

Filing information

Document Number

L23000168583

FEI/EIN Number

NONE

Date Filed

04/04/2023

Effective Date

04/04/2023

State

FI

Status

**ACTIVE** 

Principal Address

8182 CARAVELLE DR JACKSONVILLE, FL 32244

Mailing Address

8182 CARAVELLE DR JACKSONVILLE, FL 32244

Registered Agent Name & Address

EASTON, JAMES 7061 OLD KINGS RD

**APT 307** 

JACKSONVILLE, FL 32217

Authorized Person(s) Detail

Name & Address

Title MGR

WATERS, KEVIN D 212 NORHT LAURA STREET JACKSONVILLE, FL 32202

**Annual Reports** 

No Annual Reports Filed

**Document Images** 

04/04/2023 - Florida Limited Liability

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