724000076797

(Requestor's Name)
(Address)
(Address)
(Address)
(12-1-1-1)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
3

Office Use Only



200441223052

2024 DEC 19 AM 9: 47

2024 DEC 19 PH 4: 06



٠.

115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	12/23/2024			
Name:		_ _		
Reference #	2599737			~
	4PH	ILLIPS, INC.	7.VI	1024 DEC
,			#173	
✓ Article	es of Incorporation/Authorizatio	n to Transact Business	ASS	9
☐ Amer	ndment			AH 9:
Chan	ge of Agent			9: 47
☐ Reins	statement			
✓ Convergence	ersion			
☐ Merge	er			
☐ Disso	lution/Withdrawal			
Fictitie	ous Name			
Other				
Authorized A	Amount: \$ 105.00	<u>.</u>		
Signature:	Ohyme Paine			

COVER LETTER

TO: New Filing Section

Division of Corporations						
SUBJECT: 4PHILLIPS, INC. Name of	Resulting Florida I	rofit Corporation	<u> </u>			
The enclosed Articles of Conversion, Articles of entity into a "Florida Profit Corporation" in account	•			llowi	ng elig	gible
Please return all correspondence concerning this	matter to:					
AMANDA PARMER Contact Person			<u> </u>	() 	2024 (
GOLAN CHRISTIE TAG	LIA LLP		T ARASS		1024 DEC 19 AI	֓֞֞֝֞֝֞֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓
70 W. MADISON STREET,	STE 1500			STATE	AH 9: 47	
CHICAGO, ILLINOIS 600						
APARMER@GCT.LAW E-mail address: (to be used for future annu-	al report notification	on)				
For further information concerning this matter, particularly AMANDA PARMER		696-135	4			
Name of Contact Person	Area Coc	e and Daytime T	elephone Number			
Enclosed is a check for the following amount:						
■ \$105.00 Filing Fees □\$113.75 Filing Fees and Certificate of Status	□\$113.75 Filing and Certified Cop		Copy, and			
Mailing Address: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	С т	treet Address: lew Filing Secti livision of Corp he Centre of Ta 415 N. Monroc	orations			

Tallahassee, 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.

 The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is: 4PHILLIPS, INC. 		2024
Enter Name of the Converting Entity CORPORATION	[=] ≥: =:	2024 DEC 19
2. The converting entity is a CONFORATION (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 LLINOIS	SS 7 - 1: - TI	9 AM 9: 47
(Enter state, or if a non-U.S. entity, the name of the country) on 02/02/2005	<u>п:</u>	47
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> 4PHILLIPS, INC.		
Enter Name of Florida Profit Corporation		
4. This conversion was approved by the eligible converting entity in accordance with this chapter and t current/organic jurisdiction.	he laws	of its
5. If not effective on the date of tiling, enter the effective date: (The effective date: Cannot be prior to nor more than 90 days after the date this document is file Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this elisted as the document's effective date on the Department of State's records.	•	

Signed this
Required Signature for Florida Profit Corporation:
Signature of Director, Officer, or, if Directors or Officers have not been selected, an Incorporator: (SIGN HERE) Printed Name: PRESIDENT
Required Signature(s) on behalf of Converting Florida partnerships, limited partnerships, and limited liability companies: [See below for required signature(s).]
Signature: (SIGN, HERE)
Printed Name: JONATHAN PHILLIPS Title: PRESIDENT
Signature:
Printed Name: Title: Title:
Signature:
Printed Name: Title:
Signature:
Printed Name: Title:
Signature:
Printed Name: Title:
Signature:
Printed Name: Title:
If Florida General Partnership or Limited Liability Partnership: Signature of one General Partner.
If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners.
If Florida Limited Liability Company: Signature of a Member or Authorized 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: 4PHILLIPS, INC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: Principal street address Mailing address, if different is: 1212 PORT LANE SARASOTA, FLORIDA 34242 ARTICLE III PURPOSE The purpose for which the corporation is organized is: The business of the Company shall be any and all lawful business. ARTICLE IV SHARES
The number of shares of stock is: 1,000 ARTICLE V OFFICERS AND/OR DIRECTORS Name and Title: JONATHAN R. PHILLIPS, PRESIDENT JONATHAN R. PHILLIPS, SECRETARY Name and Title: 1212 PORT LANE 1212 PORT LANE Address: Address: SARASOTA, FLORIDA 34242 SARASOTA, FLORIDA 34242 JONATHAN R. PHILLIPS, DIRECTOR Name and Title: Name and Title: 1212 PORT LANE Address: Address: SARASOTA, FLORIDA 34242 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:

JONATHAN R. PHILLIPS

Address:

1212 PORT LANE

SARASOTA, FLORIDA 34242

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/Registered Agent

12/17/25 Date

EC 19 AM 9:47