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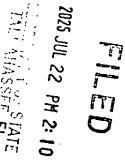
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## **COVER LETTER**

TO: **New Filing Section** Division of Corporations

SUBJECT: Bradford Hills POA, Inc.

Name of Resulting Florida Profit Corporation

The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607,11933 & 607,0202, F.S.

Please return all correspondence concerning this matter to:

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Bradford Hills POA, LLC

Firm/Company

12921 US Highway 19 S

Thomasville, GA 31792

City. State and Zip Code

sharonmarie@harbordevelopers.com

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

For further information concerning this matter, please call:

Sharon Marie Davis

Name of Contact Person

at (229 )516-1619

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$105.00 Filing Fees □\$113.75 Filing Fees □\$113.75 Filing Fees ■\$122.50 Filing Fees,

and Certificate of

Status

and Certified Copy

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 8 fg ... 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 is:

Bradford Hills POA 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-LLS, entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
on 4/23/2024
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:
Bradford Hills POA Inc.
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: 7/23/2024

(The effective date: Cannot be prior to nor more than 90 days after the date this document is filed by the Florida

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.

Department of State.)



Signed this 23rd	_ <sub>day of</sub> <mark>July</mark>	. 2024	
Required Signature f	or Florida Profit Corporation:		
Signature of Director	Officer, or, if Directors or Office	rs have not been selected, an Incorporator:	
Printed Name: Kelse	ey Robinson Title: CF(	)	
companies: [See belo	ow for required signature(s).]	da partnerships, limited partnerships, a	ad limited liability
Signature:			
Printed Name: 21	naron Mane Dans	_ Title: Authorized Corp. Repe	contative
Signature:	suy 1/2		
Printed Name: 1	1 Sey Kolinson	Title:	
Signature:	1		
Printed Name:	· · · · · · · · · · · · · · · · · · ·	Title:	
Signature:			
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Signature:			
Printed Name:		Title:	
Signature:			
Printed Name:		Title:	
If Florida General Pa Signature of one Gene	artnership or Limited Liability ral Partner.	Partnership:	
If Florida Limited Pa Signatures of <u>ALL</u> Ge	artnership or Limited Liability eneral Partners.	Limited Partnership:	
If Florida Limited Li			
•	r or Authorized Representative.		
All others: Signature of an author	ized person		

Fees:

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

The principa	I place of business/mailing address is:	
	Principal street address	Mailing address, if different is:
6982 I	Lawton Chiles Lane	12921 US Highway 19 S
Tallah	assee, FL 32312	Thomasville, GA 3179
• •	for which the corporation is organized is:	nce, and preservation of the Common Areas,
	· · · · · · · · · · · · · · · · · · ·	ities delegated to it in the Declaration.
	and these Articles; and (iii) adn	
	<del>-</del>	
ARTICLE		sociation and the Owners.
<b>ARTICLE</b> The number <b>ARTICLE</b>	IV SHARES of shares of stock is:  V OFFICERS AND/OR DIRECTOR	
<b>ARTICLE</b> The number <b>ARTICLE</b>	IV SHARES of shares of stock is:	
ARTICLE The number ARTICLE	IV SHARES of shares of stock is:  V OFFICERS AND/OR DIRECTOR	<u>ss</u>
<b>ARTICLE</b> The number <b>ARTICLE</b> Name and T	IV SHARES of shares of stock is:  V OFFICERS AND/OR DIRECTOR title: Kelsey Robinson, CFO	RS Name and Title:
ARTICLE The number ARTICLE Name and T Address:	IV SHARES of shares of stock is:  V OFFICERS AND/OR DIRECTOR itle: Kelsey Robinson, CFO 12921 US Highway 19 S	Name and Title:  Address:
ARTICLE The number ARTICLE Name and T Address:	IV SHARES of shares of stock is:  V OFFICERS AND/OR DIRECTOR itle: Kelsey Robinson, CFO 12921 US Highway 19 S Thomasville, GA 31792	Name and Title:  Address:  Name and Title:
ARTICLE The number ARTICLE Name and T Address: Name and T	IV SHARES of shares of stock is:  V OFFICERS AND/OR DIRECTOR itle: Kelsey Robinson, CFO 12921 US Highway 19 S Thomasville, GA 31792 itle:	Name and Title:  Address:  Name and Title:  Address:
ARTICLE The number ARTICLE Name and T Address: Name and T	IV SHARES of shares of stock is:  V OFFICERS AND/OR DIRECTOR itle: Kelsey Robinson, CFO 12921 US Highway 19 S Thomasville, GA 31792	Name and Title:  Address:  Name and Title:  Address:

ARTICL.		Processoral Laboratory and Comment of the Comment
ine <u>name</u>	and Florida street address (P.O. Box NC Ronald B. Warren	r acceptable) of the registered agent is:
Name:	Ronald B. Warren	
Address:	626 Hiamonee Drive	
	Tallahassee, FL 32312	
******	**********	******
	· · · · · · · · · · · · · · · · · · ·	vice of process for the above stated corporation at the place designated in pintment as registered agent and agree to act in this capacity

7/23/2024

Date

Required Signature/Registered Agent

FILED
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