A17000000008

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: W17-40320
,

Office Use Only



600299722176

DETAPRECEY WESTA

CAE CART OF STATE LAHASSEE, FLORID

17 JUN -9 AM 9: L3

S. WARREN JUN 1 2 2017



June 1, 2017

CORPORATION SERVICE COMPANY

SUBJECT: RECHLER FAMILY LIMITED PARTNERSHIP, LLLP

Ref. Number: W17000046320

We have received your document for RECHLER FAMILY LIMITED PARTNERSHIP, LLLP and the authorization to debit your account in the amount of \$1052.50. However, the document has not been filed and is being returned for the following:

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

If the limited partnership wishes to be a limited liability limited partnership, the document must contain a statement to that effect. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren Regulatory Specialist II

Letter Number: 817A00011000

Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 664478 7840189 **AUTHORIZATION:** COST LIMIT : ORDER DATE: May 31, 2017 ORDER TIME : 3:31 PM ORDER NO. : 664478-010 CUSTOMER NO: 7840189 DOMESTIC FILING NAME: RECHLER FAMILY LIMITED PARTNERSHIP, LLLP EFFECTIVE DATE: ARTICLES OF INCORPORATION XX CERTIFICATE OF LIMITED PARTNERSHIP __ ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY ____ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

CONTACT PERSON: Melissa Zender - EXT.

1201 Hays Street

COVER LETTER

	Registration Section Division of Corporations	
SUBJEC	CT: Rechler Family Limited Part	nership, LLLP
20202		hip or Limited Liability Limited Partnership
submitte	osed Certificate of Conversion, Certificate d to convert an "Other Organization" into Liability Limited Partnership in accordance	a Florida Limited Partnership or
Please re	turn all correspondence concerning this m	atter to:
Benne	ett Rechler	
	Contact Person	
c/o We	e're Associates	<u> </u>
	Firm/Company	
100 Je	richo Quadrangle	
	Address	
Jericho	o, New York 11753	
	City, State and Zip Code	-
	er@were.com	
E-mai	address: (to be used for future annual report notif	fication)
For furthe	er information concerning this matter, plea	ase call:
George	e D. Karibjanian	202 \ 495-2676
	Name of Contact Person Ar	ea Code and Daytime Telephone Number
Enclosed	is a check for the following amount:	
Fees, (\$	50 Filing Fees	\$1,105.00 Filing Fees \$1,113.75 Filing and Certified Copy Certified Copy, and Certificate of Status
STREET	ADDRESS:	MAILING ADDRESS:
-	on Section	Registration Section
Division of Clifton Bu	of Corporations	Division of Corporations P. O. Box 6327
	unding cutive Center Circle	Tallahassee, FL 32314
	ee, FL 32301	

Certificate of Conversion

For

"Other Business Organization"

Into

Florida Limited Partnership or Limited Liability Limited Partnership

This Certificate of Conversion and attached Certificate of Limited Partnership are submitted to convert the following "Other Business Entity" into a Florida Limited Partnership or Limited Liability Limited Partnership in accordance with s.620.2104, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:

Rechler Family Limited Partnership

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a Limited Partnership

(Enter entity type. Example: corporation, limited liability company, sole proprietorship, general partnership, common law or business trust, etc.)

first organized, formed or incorporated under the laws of New York (Enter state, or if a non-U.S. entity, the name of the country)

_m December 17, 1996

(Enter date "Other Business Entity" was first organized, formed or incorporated)

3. The name of the Florida Limited Partnership or Limited Liability Limited Partnership as set forth in the attached Certificate of Limited Partnership:

Rechler Family Limited Partnership, LLLP

(Enter Name of Florida Limited Partnership or Limited Liability Limited Partnership)

- 4. The conversion was approved as required by Chapter 620, F.S., and was approved in such a manner that complied with the converting organization's governing law.
- 5. If not effective on the date of filing, enter the effective date:

 (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Certificate of Limited Partnership, if an effective date is listed therein.)
- 6. The conversion is permitted by the applicable law(s) governing the other business entity and the other business entity complies with such law(s) in effecting the conversion:
- 7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is currently organized, formed or incorporated.

JUN -9 AM 9: 4:

C:	ed this 30th day of May	.20 /7
20161	ntnacal Pach (Feneral Papiners) astedan Attache	description demotion
	nersimpliamoted spatiality and ted Partnersimp: I the facts stated in this document are true. Any false	
	ce felony as provided for in s.817.155, F.S.	miornadon constitues a ande
под.	1.1	
	ature: Swall	
Print	cd Name: Beresti Raciter Titl	c: Genoral Partner
Sign	ature: Mal Kolas	
Print	ed Name: Agrand) Rabiopovita	c: General Periner
Sions	ature: Mill Mill M	
Print	ed Name issue Redwortscomm	e: General Partner
	/	
Signa	iture:	
Prinu	ed Name:Title	3i
Signa	dure:	
Printe	ed Name: Title	D:
Siona	ture:	
	ed Name: Title	
	ired Signature(s) on behalf of Other Business Enti	
degre	the facts stated in this document are true. Any false to felony as provided for in s.817.155, F.S. [See belower:	
degre Signa	e felony as provided for in s.817.155, F.S. [See belo	
Signal Printe If Flo Signal	e felony as provided for in s.817.155, F.S. [See belo sure: Streeth VII]	w for required signature(s).] General Partner
Signal Printe If Flo Signal If Dire	ture: Streethin Title rida Corporation: cure of Chairman, Vice Chairman, Director, or Officer	w for required signature(s).] General Partner tor must sign.
Signal Printe If Flo Signal If Dire Signal If Dire If Flo Signal	ture: Corporation: Corporation:	w for required signature(s).] General Partner tor must sign.
Signat Printe If Flo Signat If Dire Signat If Flo Signat All oth	e felony as provided for in s.817.155, F.S. [See belo ture: d Name: Beauth Rechim Title rida Corporation: cure of Chairman, Vice Chairman, Director, or Officer sctors or Officers have not been selected, an Incorpora rida General Partnership or Limited Liability Part cure of one General Partner. rida Limited Liability Company: cure of a Member or Authorized Representative.	w for required signature(s).] General Partner tor must sign. nership:
Signat Printe If Plo Signat If Dire If Flor Signat If Flor Signat Signat All oth	e felony as provided for in s.817.155, F.S. [See belo ture: d Name: Beausi Rechim Title rida Corporation: are of Chairman, Vice Chairman, Director, or Officer sectors or Officers have not been selected, an Incorpora rida General Partnership or Limited Liability Part are of one General Partner. rida Limited Liability Company: are of a Member or Authorized Representative. lers:	w for required signature(s).] General Partner tor must sign. nership:
Signat Printe If Flo Signat If Dire Signat If Flo Signat All oth	e felony as provided for in s.817.155, F.S. [See belo ture: d Name: Beneau Rechim Title rida Corporation: ture of Chairman, Vice Chairman, Director, or Officer ectors or Officers have not been selected, an Incorpora rida General Partnership or Limited Liability Part ture of one General Partner. rida Limited Liability Company: ture of a Member or Authorized Representative. lers: ture of an authorized person.	General Partner tor must sign. nership:
Signat Printe If Plo Signat If Dire If Flor Signat If Flor Signat Signat All oth	ture: Company Company: Conversion:	s \$2.50 \$1,000.00
Signat Printe If Plo Signat If Dire If Flor Signat If Flor Signat Signat All oth	e felony as provided for in s.817.155, F.S. [See belo ture: d Name: Beauth Rechia rida Corporation: ture of Chairman, Vice Chairman, Director, or Officer sctors or Officers have not been selected, an Incorpora rida General Partnership or Limited Liability Part ture of one General Partner. rida Limited Liability Company: ture of a Member or Authorized Representative. 1ers: ture of an authorized person. Certificate of Conversion:	s: General Pariner tor must sign. nership:

Page 2 of 2

CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

, Rechler Family Limited Partnership, LLLP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

2 100 Jericho Quadrangle	
Street address of initial designated office	• •
Jericho, New York 11753	<u>.</u>
George D. Karibjanian	
Name of Registered Agent for Service of Process	•
_{4.} 150 E. Palmetto Park Road, Suite 800	
Florida street address for Registered Agent	
Boca Raton, Florida 33432	

5. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.

Signature of Registered Agent

6, 150 E. Palmetto Park Road, Suite 800

Mailing address of initial designated office

Boca Raton, Florida 33432

7. If limited partnership elects to be a limited liability limited partnership, check box %.

8. Name and business address of each go Name:	ame and business address of each general partner: Business Address:		
Bennett Rechier	100 Jericho Quadrangle		
,	Jericho, NY 11753		
Hannah R. Rabinowitz	1440 Lands End Road		
	Manalapan, FL 33462		
Yvetta Rechler-Newman	101 Huntting Street		
	Southampton, NY 11968		
9. Effective date, if other than the date of filing:			
	re than 90 days after the date the document is		
filed by the Florida Department of State.)			
Signed this <u>30</u> day of	May 2017.		
his document are true. Any false informat	ual(s) signing affirm(s) that the facts stated in tion constitutes a third degree felony as		
provided for invest 155 F.S.	Bennett Rechler		
This fall	Hannah Rabinowitz		
Thath ha	Yvetta Rechler-Newman		
Schiebra			

Page 2 of 2

FILED 17 JUN-9 AM 9: 43