

LS900000000000225

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

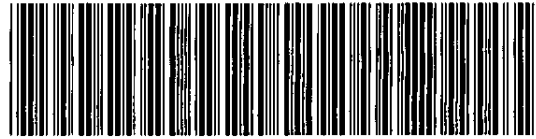
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JUL - 9 2009

EXAMINER



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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 JUL - 8 AM 11:57

**Certificate of Conversion**  
For  
**"Other Business Entity"**  
Into  
**Florida Limited Liability Company**

This Certificate of Conversion **and attached Articles of Organization** are submitted to convert the following **"Other Business Entity"** into a **Florida Limited Liability Company** in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Certificate of Conversion is:  
SUNCHASER PROPERTY MANAGEMENT, LTD.

**(Enter Name of Other Business Entity)**

2. The "Other Business Entity" is a LIMITED PARTNERSHIP.  
**(Enter entity type. Example: corporation, limited partnership, sole proprietorship, 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 2/3/2005.  
**(Enter date "Other Business Entity" was first organized, formed or incorporated)**

3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:

NA

4. The name of the Florida Limited Liability Company as set forth in the **attached Articles of Organization**:

2301 NE 16TH STREET LLC  
**(Enter Name of Florida Limited Liability Company)**

5. If not effective on the date of filing, enter the effective date: FILING 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 Articles of Organization, if an effective date is listed therein.)**

Signed this \_\_\_\_\_ day of JUNE 20 09.

**Signature of Member or Authorized Representative of Limited Liability Company:**

Signature of Member or Authorized Representative: James T. Mazzaro Jr 7/1/09  
Printed Name: JAMES T. MAZZARO, JR. Title: MANAGER

**Signature(s) on behalf of Other Business Entity: [See below for required signature(s).]**

Signature: \_\_\_\_\_  
Printed Name: JAMES T. MAZZARO, JR. Title: GENERAL PARTNER 7/1/09

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

**If Florida Corporation:**

Signature of Chairman, Vice Chairman, Director, or Officer.

If Directors or Officers have not been selected, an Incorporator must sign.

**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.

**All others:**

Signature of an authorized person.

**Fees:**

Certificate of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

2301 NE 16TH STREET LLC

(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC.")

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

#### Principal Office Address:

2301 NE 16TH STREET  
POMPANNO BEACH, FL 33062

#### Mailing Address:

917 NW 18 AVENUE  
BOCA RATON, FL 33486

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

JAMES T. MAZZARO, JR.  
Name  
917 NW 18 AVENUE  
Florida street address (P.O. Box **NOT** acceptable)  
BOCA RATON FL 33486  
City, State, and Zip

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 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 608, F.S.*

James T. Mazzaro, Jr. 7/1/09  
Registered Agent's Signature (REQUIRED)

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AFFAIRS

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

ROBERT N. DEBENEDICTIS

625 ORTON AVENUE, APT. 8

FORT LAUDERDALE, FL 33304

MGRM

JAMES T. MAZZARO, JR.

917 NW 18 AVENUE

BOCA RATON, FL 33486

MGRM

THE OPPORTUNITY TRUST

227 EAST 56<sup>th</sup> STREET, SUITE 400

NEW YORK, NY 10022

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: FILING DATE  
(OPTIONAL)

(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 Conversion, if an effective date is listed therein.)

**REQUIRED SIGNATURE:**

James T. Mazzaro Jr 7/1/09  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JAMES T. MAZZARO, JR.

Typed or printed name of signee

**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)**