# L14000690766

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

Office Use Only



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May 22, 2014

ANDREA FIOCCHI, ESQ 44 WALL ST 10 FLOOR NEW YORK, NY 10005

SUBJECT: MORABITO PROPERTIES LLC

Ref. Number: W14000028505

We have received your document for MORABITO PROPERTIES LLC and your check(s) totaling \$185.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a chairman, vice chairman, director, officer, or an incorporator, if directors or officers have not been selected.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 014A00009634

#### **COVER LETTER**

	Registration S Division of Co					
SUBJEC	CT: MORAE	BITO PROPERTIES	LLC			
SOBOL			of Resulting Florida	Limited	l Company)	
					d fees are submitted to c cordance with s. 605.10	
Please re	eturn all corre	espondence concerning	g this matter to:			
Andrea	Fiocchi, Es	q.				
		(Contact Person)	· · · · · · · · · · · · · · · · · · ·			
Reinha	rdt LLP			_		
		(Firm/Company)		-		
44 Wall	Street 10 F	loor				
		(Address)	<del></del>			
New Yo	ork, NY 1000	05				
	((	City, State and Zip Code)	. <u>.</u>	•		
afiocch	i@reinhardt	llp.com				
E-mail	l Address: (to be	used for future annual re	port notifications)	•		
For furth	ner informatio	on concerning this mat	tter, please call:			
Andrea	Fiocchi, Es	q.	_at (212	710-	0970	
(	Name of Conta	ct Person)	(Area Code)	(Dayı	time Telephone Number)	
Enclosed	d is a check fo	or the following amou	nt:			
(\$25 for C	00 Filing Fees Conversion or Articles zation)	☐\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing and Certified Cop		\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
Registrate Division Clifton F 2661 Ex	T ADDRESS tion Section of Corporati Building secutive Centers	ons er Circle	Registr Divisio P. O. B	ation S n of Co ox 632	orporations	

INHS11 (02/14)

## **Articles of Conversion**

For

### "Other Business Entity"

Into

#### Florida Limited Liability Company

The Articles 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.605.1045, Florida Statutes.

Morabito Properties LLC (En	ter Name of Other Business Entity)
2. The "Other Business Entity" is:	Foreign Limited Liability Company
<u>.</u> ,,	(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorpor	rated under the laws of New York
on July 22, 2005 (date of organization, formation or inc	
(date of organization, formation or in	corporation)
0.000	
3. The name of the Florida Limited	d Liability Company as set forth in the attached Articles of Organization:
	d Liability Company as set forth in the attached Articles of Organization:  Description:
Morabite	
Morabite (Enter Name) 4. If not effective on the date of file	o Properties LLC of Florida Limited Liability Company)
Morabite  (Enter Name)  4. If not effective on the date of fill (The effective date: 1) cannot be date this document is filed by the	o Properties LLC of Florida Limited Liability Company)

Page 1 of 2

Signed this day of	<u></u>			
Signature of Authorized Representative of Limit	ed Liability Company:			
Signature of Authorized Representative:  Printed Name: Valerio Morabito	Odorologo Manager			
Signature(s) on behalf of Other Business Entity; [S				
Signature: Valerio Morabino.	see solow for required signal (e)-1			
Printed Name: Valerio Morabito	Title: Operating Manager			
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 Officers have not been selected, an Inc				
If Florida General Partnership or Limited Liabilit	•			
Signature of one General Partner.				
If Florida Limited Partnership or Limited Liabilit Signatures of ALL General Partners.	y Limited Partnership:			
All others: Signature of an authorized person.		TALLY	15	» P•
Fees:		FESS.	<u> </u>	.5 F 3 Mg. gha J Mai, sawi
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	E COM	[전 17: <b>월</b>	el

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A DODLOL D. Y. N						
ARTICLE I - Name: The name of the Limited Liability (	Company is:					
·						
Morabito Properties LLC						
(Must end with the words	"Limited Liability C	ompany, "L.L.C.," or "Ll	LC.")			
ARTICLE II - Address: The mailing address and street addr	ess of the princ	ipal office of the Li	mited Liabilit	y Compa	ny is:	
Principal Office Address:	<u>N</u>	<u> Iailing Address:</u>				
1691 Michigan Ave Suite 440	1	1691 Michigan Av	e Suite 440			
Miami Beach, FL, 33139		Miami Beach, FL,		<del></del>		
——————————————————————————————————————			<del></del>	<del></del>		
ARTICLE III - Registered Agent, The Limited Liability Company cannot serve a business entity with an active Florida registrat	is its own Registered					
The name and the Florida street add	lress of the regi	stered agent are:				
	_					
· VALERIO M	Name	<u> </u>	_			
1601 Michigan	n Avanua Cuit	- 440				
1691 Michigar Florida street a		ox <u>NOT</u> acceptable	<u>:)</u>			
Miami Beach,		FL 33139				
	City	Zip	<del></del>			
Having been named as registered	lacoust and to ac	ant amina of man	ean for the abo	sua atatad	limita	d
liability company at the place a						и
registered agent and agree to act i						all
statutes relating to the proper an						1
accept the obligations of my po	sition as registe	ered agent as provid	led for in Chaj	oter 605, i	F.S	
	1/2/5	75	•			
	140/d 01	,,,,,		E	4	
Registered	Agent's Signatu	re (REQUIRED)	<del></del>		HAY	
•				7.50°	29	
	(CONTINUE	D)		(2) 1 (1) 1	Ġ	
	CONTINUE	D)				1 ;
	Page 1 of 2			203 VI C	:: ::	ig
					ሞጋ	

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Morabito, Valerio
	1691 Michigan Avenue, Suite 440
	Miami Beach, FL 33139
(Use attachment if necessary)	·
(,)	
	e date of filing: (OPTIONAL) be specific and cannot be more than five business days
n effective date is listed, the date must 90 days after the date of filing.)	
n effective date is listed, the date must 90 days after the date of filing.)	
n effective date is listed, the date must	
n effective date is listed, the date must 90 days after the date of filing.)  ICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	be specific and cannot be more than five business days
REQUIRED SIGNATURE:  Signature of a membe (In accordance with section 605.0203 (constitutes an affirmation under the penal am aware that any false information su	er or an authorized representative of a member.  1) (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are fine: abmitted in a document to the Department of State
REQUIRED SIGNATURE:  Signature of a membe (In accordance with section 605.0203 (constitutes an affirmation under the penal am aware that any false information su	er or an authorized representative of a member.  1) (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are fine: abmitted in a document to the Department of State
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REQUIRED SIGNATURE:  Signature of a membe (In accordance with section 605.0203 (constitutes an affirmation under the penal am aware that any false information su constitutes a third degree felony as prov	er of an authorized representative of a member.  1) (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are fine: abmitted in a document to the Department of State rided for in s.817.155, F.S.)
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REQUIRED SIGNATURE:  Signature of a membe (In accordance with section 605.0203 (constitutes an affirmation under the pend I am aware that any false information su constitutes a third degree felony as prov	be specific and cannot be more than five business days  er or an authorized representative of a member.  1) (b), Florida Statutes, the execution of this document alties of perjury that the facts stated herein are frue: abmitted in a document to the Department of State rided for in s.817.155, F.S.)  Valerio Morabito
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Page 2 of 2

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-