

L15000149807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

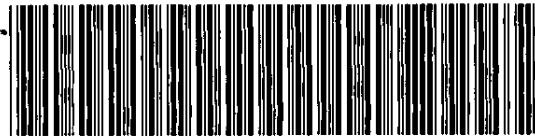
(Business Entity Name)

(Document Number)

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

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DEPARTMENT OF REVENUE  
DIVISION OF REVENUE  
15 SEP -8 PM 4:26  
TO ACKNOWLEDGE  
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
15 SEP -8 AM 8:00

SEP 09 2015

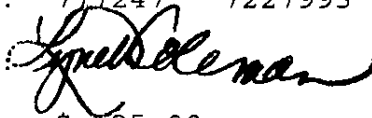
T SCHROEDER

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 777247 7227993

AUTHORIZATION



COST LIMIT : \$ 125.00

ORDER DATE : September 8, 2015

ORDER TIME : 3:42 PM

ORDER NO. : 777247-005

CUSTOMER NO: 7227993

DOMESTIC FILING

NAME: MORSO RETAIL INVESTMENT  
COMPANY, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XX PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT. 62935

EXAMINER'S INITIALS: \_\_\_\_\_

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MORSO Retail Investment Company, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Kahan, Esq.

Name of Person

David Kahan, P.A.

Firm/Company

6420 Congress Ave., Suite 1800

Address

Boca Raton, FL 33487

City/State and Zip Code

david@dkpalaw.com

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

For further information concerning this matter, please call:

David Kahan

561

672-8330

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$125.00 Filing Fee

☐

\$130.00 Filing Fee &  
Certificate of Status

☐

\$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐

\$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

Mailing Address

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MORSO Retail Investment Company, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

13024 Ballantyne Corporate Place  
Suite 500  
Charlotte, NC 28277

Mailing Address:

13024 Ballantyne Corporate Place  
Suite 500  
Charlotte, NC 28277

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:

David Kahan, P.A.  
Name

6420 Congress Ave., Suite 1800  
Florida street address (P.O. Box NOT acceptable)  
Boca Raton, FL 33487  
City State 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 605, F.S.*

David Kahan, P.A.

By:

[Signature]  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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DIVISION OF CORPORATIONS  
15 SEP -8 AM 8:00

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Morgan Capital Management, LLC

13024 Ballantyne Corporate Place, Suite 500

Charlotte, NC 28277

15 SEP -8 AM 8:00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

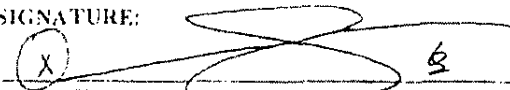
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

ARTICLE VI: Other provisions, if any.

This limited liability company is a manager-managed limited liability company. This limited liability company is authorized to make investments, either through debt or equity, into real estate projects, and any other lawful purposes incidental to such purpose.

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

George A. Morgan, III

Typed or printed name of signer

**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)