L21000503216

(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:

Office Use Only



100377116101

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

PHONE: 850-558-1500
ACCOUNT NO. : 12000000195
REFERENCE : 269700 7161018
AUTHORIZATION: Spelle Rena
COST LIMIT : \$ 150'.00
ORDER DATE: November 29, 2021
ORDER TIME : 2:52 PM
ORDER NO. : 269700-005
CUSTOMER NO: 7161018
DOMESTIC AMENDMENT FILING
NAME: CARACCIOLO GROUP LLC
EFFECTIVE DATE:
XX ARTICLES OF AMENDMENT/CONVERSION RESTATED ARTICLES OF INCORPORATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Eyliena Baker EXT#

EXAMINER'S INITIALS:

COVER LETTER

TO: New Filing 3 Division of 9	Section Corporations			
SUBJECT: CARAC	•			
SUBJECT:		sulting Florida Limi	ited Company)	
The enclosed Article Business Entity" int	es of Conversion, Artic o a "Florida Limited L	cles of Organizati iability Company	tion, and fees are submitted to convey; in accordance with s. 605.1045,	ert an "Other F.S.
Please return all cor	respondence concernir	ng this matter to:		
Marc D. Leve				
	(Contact Person)		_	
Sills Cummis & Gross	s, P.C.			
	(Firm/Company)	<u> </u>	_	
101 Park Avenue, 28	• • •			
	(Address)		_	
New York, New York	10178			
(City, State and Zip Code)		_	
mleve@sillscummis.c	om			
E-mail Address: (to	be used for future annual re	port notifications)	-	
For further informat	ion concerning this ma	tter, please call:		
Marc D. Leve		at (212) 500 1591 (Daytime Telephone Number)	
(Name of Cont	act Person)	(Area Code)) (Daytime Telephone Number)	
Enclosed is a check dollars and drawn or	for the following amou a bank located in the	int: (All checks p	processed by this office must be pay	able in US
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)	□\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Cop		
Mailing Add New Filing S Division of C P.O. Box 632	ection forporations		Street Address: New Filing Section Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

CARACCIOLO GROUP LLC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited liability company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of (Enter state, or if a non-U.S. entity, the name of the country)
(Enter state, or if a non-U.S. entity, the name of the country)
August 13, 2015
on; and converted into a limited liability company under the laws of (date of organization, formation or incorporation) Arizona, on July 3, 2017.
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
CARACCIOLO GROUP LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
the date this document is filed by the Florida Department of State.)
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.
5. The plan of conversion has been approved in accordance with all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

which such members are entitled under ss. 605.1006 and 605.1061-605.1072. F.S.

Signed this 24th day of November	20_21
Signature of Authorized Representative of Limit	ted Liability Company:
Signature of Authorized Representative:	
Signature of Authorized Representative:	The Manager
Printed Name: Brad Caracciolo	Ille: Manager
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)]
Signature:	
Printed Name: Brad Caracciolo	ru. Manager
Printed Name: Brad Garace Glo	Title: manager
Signature:	
Signature:	Litle:
Signature:	
Printed Nume:	Litle:
Signature:Printed Name:	
Printed Name:	Fitle:
Signature:Printed Name:	
Printed Name:	_ 1 me:
Simulation	
Signature:Printed Name:	Title
Timed Count.	
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer.
If Directors or Officers have not been selected, an Inc	
	•
If Florida General Partnership or Limited Liabili	t <u>y Partnership:</u>
Signature of one General Partner.	
AMERICAN PROPERTY OF THE CONTRACTOR OF THE CONTR	
If Florida Limited Partnership or Limited Liability	y Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
The state of the s	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	5125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)
<u>* * · · · · · · · · · · · · · · · · · ·</u>	- I

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
CARACCIOLO	GROUP LLC	
	(Must contain the words "Limited Liab(laty Company, "L.L.C.," or "LLC.")	

ARTICLE II - Address:

ARTICLE 1 - Name:

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

Principal Office Address:	Mailing Address:	
16417 Carrara Way	16417 Carrara Way	
Unit 102	Unit 102	
Naples FL 34110	Naples FL 34110	

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

(The United Enablity 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:

Brad Caracciolo	
	lame
16417 Carrara Way, Unit	102
Florida street address (P.O. Box NOT acceptable)
Naples	FL 34110
City	Zip

Having been named as registered agent and to occept service of process for the above stated limited liability company at the place designated in this certificate. Thereby 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.N.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" – Manager	
MGR	Brad Caracciolo
	16417 Carrara Way, Unit 102
	Naples FL 34110
(Use attachment if necessary)	
(C se intachment it necessary)	
ICLE V: Other provisions, if any,	
restrict provident in any.	
REQUIRED SIGNATURE:	
	7
- Company	

Filing Fees \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

Typed or printed name of signee

Brad Caracciolo

\$ 5.00 Certificate of Status (Optional)