# P210000477738

| (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: |   |
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| (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status   | (Requestor's Name)                      |
| (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status   |   |
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SECRETARY OF STATE

FALLAHASSEE, FLORIDA

D O'KEEFE

W21-17371



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 10, 2021

ANTHONY MORALES MYUSACORPORATION.COM 1 RADISON PLAZA, STE. 800 NEW ROCHELLE, NY 10801

SUBJECT: MORBITZER MANAGEMENT, INC.

Ref. Number: W21000017371

We have received your document for MORBITZER MANAGEMENT, INC. and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

As a condition of a conversion, pursuant to s.605.0212(9) & s.605.0212(10), s.607.1622(9) and/or 607.1622(10), Florida Statutes, the entity must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the conversion is submitted for filing.

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) 245-6052.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 621A00003020

2021 MAR -8 AH 4: 38

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#### **COVER LETTER**

| TO: New Filing So<br>Division of Co                          | orporations  | T INC                         |                 |  |                |                  |         |
|--|--|-------------------------------|-----------------|--|----------------|------------------|---------|
| SUBJECT:   | TZER MANAGEMEN   | I, INC.                       |                 |  | _              |                  |         |
|  | Name of  | Resulting Flor                | ida Profit      | Corporation  |                |                  |         |
|  | of Conversion, Articles of<br>Profit Corporation" in acc |                               |                 |  | t the follow   | ving e           | ligible |
| Please return all corre                                      | spondence concerning thi                                 | s matter to:                  |                 |  |                |                  |         |
| Anthony Morales  |  |                               |                 |  |                |                  |         |
|  | Contact Person   |                               |                 |  |                |                  |         |
| MyUSACorporation   | n.com  |                               |                 |  | <b>2</b> 9     | 21               |         |
|  | Firm/Company   |                               |                 |  |                | ₩                |         |
| 1 Radisson Plaza,  | Suite 800  |                               |                 |  | TASSE<br>TASSE | 8-1              | FILED   |
|  | Address  |                               |                 |  | MS.<br>Div     | 3                | $\Box$  |
| New Rochelle, Ne   | w York, 10801  |                               |                 |  | 988            | HAR -8 AM 11: 03 |         |
|  | City, State and Zip Cod                                  | e                             |                 |  |                |                  |         |
| info@myusacorpo  | ration.com   |                               |                 |  |                |                  |         |
| E-mail address:  | (to be used for future ann                               | ual report notif              | ication)        |  |                |                  |         |
| For further informatio<br>Anthony Morales                    | n concerning this matter,                                | 877                           | 330-            | 2677   |                |                  |         |
| Name of C  | Contact Person   | _at (<br>Area                 | Code and        | 1 Daytime Telephone Nu   | –<br>mber      |                  |         |
| Enclosed is a check fo                                       | τ the following amount:                                  |                               |                 |  |                |                  |         |
| ■ \$105.00 Filing Fee.                                       | s □\$113.75 Filing Fees<br>and Certificate of<br>Status  | □\$113.75 Fi<br>and Certified |                 | ☐\$122.50 Filing Fees,<br>Certified Copy, and<br>Certificate of Status |                |                  |         |
| Mailing Add<br>New Filing S<br>Division of C<br>P.O. Box 632 | Section<br>Corporations                                  |                               | New I<br>Divisi | Address: Filing Section on of Corporations fentre of Tallahassee       |                |                  |         |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

# Articles of Conversion For Converting Eligible Entity Into Florida Profit Corporation

The Articles of Conversion and attached Articles of Incorporation are submitted to convert the following eligible business entity into a Florida Profit Corporation in accordance with ss. 607.11933 & 607.0202, Florida Statutes.

| 1. The name of the Converting Entity immediately prior to the filing of the Articles of Conversion is:   |
|--|
| MORBITZER MANAGEMENT, LLC  |
| Enter Name of the Converting Entity  |
| 2. The converting entity is a LIMITED LIABILITY COMPANY  |
| (Enter entity type. Example: limited liability company, limited partnership, 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 12/19/2019  |
| Enter date "Converting Entity" was first organized, formed or incorporated.  3. The name of the Florida Profit Corporation as set forth in the <u>attached Articles of Incorporation:</u> MORBITZER MANAGEMENT, INC.   |
| Enter Name of Florida Profit Corporation   |
| 4. This conversion was approved by the eligible converting entity in accordance with this chapter and the laws of its current/organic jurisdiction.  |
| 5. If not effective on the date of filing, enter the effective date:  (The effective date: Cannot be prior to nor more than 90 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. |

| Signed this 6th day of JANUARY  | . 2021  |                               |
|---|---|-------------------------------|
| Required Signature for Florida Profit Co  |   |                               |
| Signature of Director, Officer, or, if Director                                       | ors or Officers have not been selected, an Incorporate      | or:                           |
|   | tle: PRESIDENT  |                               |
| Required Signature(s) on behalf of Convecompanies: [See below for required signature] | erting Florida partnerships, limited partnerships ture(s).] | , and limited liability       |
| Signature:  |   |                               |
|   | Title: PRESIDENT  |                               |
| Signature:  |   |                               |
|   | Title:  |                               |
| Signature:  |   | - <u></u>                     |
|   | Title:  |                               |
| Signature:  |   | <del>_</del>                  |
| Printed Name:   | Title:  | – ⊼∴ <b>&gt;</b>              |
| Signature:  |   |                               |
| Printed Name:   | Title:  | FILI<br>R-8<br>ASSE           |
| Signature:  |   |                               |
| Printed Name:   | Title:  | 14 03<br>    16 15<br>  ORID: |
| If Florida General Partnership or Limite<br>Signature of one General Partner.         |   | 3."                           |
| If Florida Limited Partnership or Limite Signatures of ALL General Partners.          | d Liability Limited Partnership:                            |                               |
| If Florida Limited Liability Company: Signature of a Member or Authorized Repre       | esentative.   |                               |
| All others:<br>Signature of an authorized person.                                     |   |                               |
| Fees: Articles of Conversion:   | \$35.00   |                               |

\$70.00

\$8.75 (Optional) \$8.75 (Optional)

Fees for Florida Articles of Incorporation: Certified Copy:

Certificate of Status:

## ARTICLES OF INCORPORATION FOR RESULTING FLORIDA PROFIT CORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

| The name of                                  | the corporation shall be: MORBITZER MANAGEN | MENT, INC.                  |   |
|--|---|-----------------------------|---|
| ARTICLE I                                    | II PRINCIPAL OFFICE                         |                             |   |
| The principal                                | I place of business/mailing address is:     |                             |   |
| Principal street address 772 HUNT CLUB TRAIL |   | Mailing addre               | ess, if different is:                   |
| PORT ORAN                                    | GE, FL 32127                                | <del> </del>                |   |
|  | for which the corporation is organized is:  |                             |   |
| MANAGING (                                   | CONDOMINIUMS AND HOMEOWNERS ASSOCIA         | TIONS. AS WELL PROVIDING RE | EAL ESTATE SERVICES.                    |
|  |   |                             |   |
|  |   |                             |   |
|  |   |                             | 5-7- N                                  |
|  |   |                             |   |
|  |   |                             | HAR -B                                  |
|  | IV SHARES of shares of stock is: 5000       |                             | * 1 * · · · · · · · · · · · · · · · · · |
|  | V OFFICERS AND/OR DIRECTORS                 |                             | AM II+ 03<br>AM II+ 03<br>E, FLORIDA    |
| Name and Ti                                  | itle: JAMES B MORBITZER, PRESIDENT          | Name and Title:             | •                                       |
| Address:                                     | 772 HUNT CLUB TRAIL                         | Address:                    |   |
|  | PORT ORANGE, FL 32127                       |                             |   |
| Name and Ti                                  | itle: MEGAN M MORBITZER, VICE PRESIDENT     | Name and Title:             |   |
| Address:                                     | 772 HUNT CLUB TRAIL                         | Address:                    | _                                       |
|  | PORT ORANGE, FL 32127                       |                             |   |
| Name and Ti                                  | itle: MARGARET MORBITZER, DIRECTOR          | Name and Title:             |   |
| Address:                                     | 772 HUNT CLUB TRAIL                         | . 11 -                      |   |
|  | PORT ORANGE, FL 32127                       |                             |   |
|  |   |                             |   |

| ARTICL. The name | E VI REGISTERED AGENT and Florida street address (P.O. Box NOT acceptate                                      | le) of the registered agent is:  |            |
|------------------|---|--|------------|
| Name:            | MEGAN M MORBITZER   |  |            |
| Address:         | 772 HUNT CLUB TRAIL   |  |            |
|                  | PORT ORANGE, FL 32127   |  |            |
|                  |   |  |            |
| *****            | ************  | ******   |            |
|                  | en named as registered agent to accept service of pro-<br>cate, I am familiar with and accept the appointment | ocess for the above stated corporation at the place design is registered agent and agree to act in this canacity | ignated in |
|                  | 2   | w regionered agent und agree to det in one capacity  |            |
|                  | affe  | 01/06/2021   |            |
|                  | Required Signature/Registered Agent   | Date   |            |