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PICK-UP	☐ WAIT	MAIL		
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Special Instructions to Filing Officer:				
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 24, 2024

REMY PASTORELLI 3399 SHORE PKWY BROOKLYN, NY 11235 US

SUBJECT: PASTORELLI ENTERPRISES INC

Ref. Number: W24000107067

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We have received your document for PASTORELLI ENTERPRISES INC and check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Sections 607.1113, 605.0203, 620.2104, and 620.8914, F.S., require the certificate of conversion to be signed by the converting entity as required by applicable law. If the converting entity is a corporation, the certificate of conversion must be signed by a chairman, vice chairman, officer, director, or an incorporator. If the converting entity is a limited liability company, the certificate of conversion must be signed by an authorized representative. If the converting entity is a general partnership or limited liability partnership, the certificate of conversion must be signed by a general partner. If the converting entity is a limited partnership or limited liability limited partnership, the certificate of conversion must be signed by all of the general partners. If the converting entity is another type of business entity, an authorized person must sign the certificate of conversion.

If you have any further questions concerning your document, please call (850) 245-6052.

Tabitha J Howell Regulatory Specialist II New Filings Section

Letter Number: 324A00016308

### **COVER LETTER**

TO: New Filing Section
Division of Corporations
SUBJECT: PASTORELLI ENTERPRISES INC
Name of Resulting Florida Profit Corporation
The enclosed Articles of Conversion, Articles of Incorporation, and fees are submitted to convert the following eligible entity into a "Florida Profit Corporation" in accordance with ss. 607.11933 & 607.0202, F.S.
Please return all correspondence concerning this matter to:
REMY PASTORELLI
Contact Person
PASTORELLI ENTERPRISES INC
Firm/Company
3399 SHORE PKWY
Address
BROOKLYN, NY 11235
City, State and Zip Code
allandon@satimecpa.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
DEMAY DAGEODELLI 045 F24 0002
REMY PASTORELLI at 845 521-9982
Name of Contact Person Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$105.00 Filing Fees □\$113.75 Filing Fees □\$113.75 Filing Fees □\$122.50 Filing Fees,
and Certificate of and Certified Copy Certified Copy, and Status Certificate of Status

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

Street Address: New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# 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.

PASTORELLI ENTERPRISES INC.
Enter Name of the Converting Entity
2. The converting entity is a S-CORPORATION
(Enter entity type. Example: limited liability company, limited partnership,
general partnership, common law or business trust, etc.)  NEW YORK  (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)
on 04/26/2022
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> :  PASTORELLI ENTERPRISES INC
D M CPI 11 D C.C.
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.

Signed this 28 day of JU	NE	, 2024	
Required Signature for Florida Profit	<del></del>		
Signature of Director, Officer, or, if Director, or		<del></del>	
Printed Name: REMY PASTORELLI	_Title:		
Required Signature(s) on behalf of Companies: [See below for required si	onverting Florida par gnature(s):]	tnerships, limited partnerships, and limited	<u>l liability</u>
Signature:			SE 2
Printed Name:	Title	s	CRE CRE
Signature:			74.67 74.67 76.63
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Signature:			
Printed Name:	Title		1E 16
Signature:			
Printed Name:	Titl	e:	
Signature:			
Printed Name:	Titl	e:	
Signature:			
Printed Name:	Titl	ic:	
If Florida General Partnership on L Signature of one General Partner.	Imited Elability-Parts	<u>iershlp:</u>	
If Florida Limited: Partnership or L. Signatures of ALL General Partners.	imited <sup>1</sup> Liability.Limit	ed:Partnership:	
If Florida Limited Liability Compa Signature of a Member or Authorized	<u>17:</u> Répresentative.		
All others: Signature of an authorized person.			
Fees: Articles of Conversion: Fees for Florida Articles of Ir Certified Copy: Certificate of Status:	scorporation: \$70	5:00 ).00 75 (Optional) 75 (Optional)	

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

Principal street address  176 NW 25th St  Miami, FL 33127  ARTICLE III PURPOSE	address, if different is:    SECRETARY OF STAIL   TALLAHANSEE FL
The principal place of business/mailing address is:  Principal street address  Mailing  176 NW 25th St  Miami, FL 33127  ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
176 NW 25th St  Miami, FL 33127  ARTICLE III PURPOSE The purpose for which the corporation is organized is:	
Miami, FL 33127  ARTICLE III PURPOSE The purpose for which the corporation is organized is:	SECRETARY OF STAIL
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	SECRETARY OF STAIL
The purpose for which the corporation is organized is:	SECRETARY OF STATI
	PH 5: 1
ARTICLE IV SHARES The number of shares of stock is: 10,000	
ARTICLE V OFFICERS AND/OR DIRECTORS	
REMY PASTORELLI, DIRECTOR Name and Title:  Name and Title:	
Address: 56 STREET ROOSEVELT DR Address:	
WEST HAVERSTRAW, NY 10993	
Name and Title: Name and Title:	
Address: Address:	
Name and Title: Name and Title:	

ARTICLE	<u>E VI REGISTERED AGENT</u>			
The name	and Florida street address (P.O. Box NOT acceptal	ble) of the registered agent is:		
Name:	REMY PASTORELLI			
Address:	176 NW 25th St			
	Miami, FL 33127			
			-IES	<b>7</b> 2
******	*********	************	CRET!	7004 Aug
Having be this certific	en named as registered agent to accept service of pr cate, I am familiar with and accept the appointment	ocess for the above stated corporation as registered agent and agree to act in	n at the place	designated in
	Ringhu Skrelli	06/28/2024	PH 5: SEE, F	
	Required Signature/Registered Agent	Date	ATE 17	