

L05000049409

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

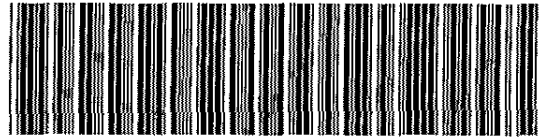
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FILED

05 JUL 22 PM 4:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

05 JUL 22 AM 11:41

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 JUL 22 PM 1:01

FILED

(CLAUDE R. WALKER, ESQ.)
HUEY, GUILDAY & TUCKER, P.A.
P. O. BOX 12500
TALLAHASSEE, FL 32317-2500

Address

Attn: Julie 224-7091
City/State/Zip Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Noble House, LLC L05000049409
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Call Julie when ready: 224-7091
- ☒ Walk in ☒ Pick up time ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

**AMENDED AND RESTATED ARTICLES OF ORGANIZATION FOR
NOBLE HOUSE, LLC**

A FLORIDA LIMITED LIABILITY COMPANY
(Filed in accordance with 608.411, F.S.)

FILED
05 JUL 22 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is Noble House, LLC

ARTICLE II - Address:

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

Principal Office Address:

1440 Dutch Valley Place
Suite 100
Atlanta, Ga 30324

Mailing Address:

Same

ARTICLE III - Registered Agent, Registered Office and Registered Agents Signature:

The name and the Florida street address of the registered agent are:

Claude R. Walker
1983 Centre Pointe Blvd., Suite 200
Tallahassee FL 32308

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 608, F.S.



Claude R. Walker

ARTICLE IV - Manager(s) or Managing Member(s):

The name and address of the sole Member and Manager is:

Title:

MRG

MGRM

MGRM

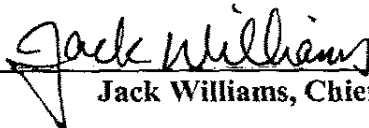
Name and Address:

Manager

Managing Member

Ashwood Development Company of Florida
1440 Dutch Valley Place, Suite 100
Atlanta, GA 30324

REQUIRED SIGNATURE:



Jack Williams, Chief Operating Officer

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)