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Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Noble Metals, LLC (Name of Resulting Florida Limited Company)
The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.
Please return all correspondence concerning this matter to:
Leann Feldt  (Contact Person)  Noble Metals LLC  (Firm/Company)  429 Whispering Oaks Ct.  (Address)  Sarasota, FL 34232  (City, State and Zip Code)  Leann f 411 @ q mail. com  E-mail Address: (to be used for future annual report notifications)  For further information concerning this matter, please call:  Leann feldt  at (608) 345-8513
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\Bigcup \\$150.00 \text{ Filing Fees} \\ \big(\\$25 \text{ for Conversion} \\ &\\$125 \text{ for Articles} \\ \text{Organization}\\ \end{array} \$\Bigcup \\$155.00 \text{ Filing Fees} \\ \and \text{Certified Copy} \\ \and \text{Certificate of Status} \end{array} \$\Bigcup \\$185.00 \text{ Filing Fees} \\ \and \text{Certified Copy, and Certificate of Status} \end{array}
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 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.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  Noble Metals of Wisconsin, 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.)  First organized, formed or incorporated under the laws of Wisconsin	ŗ
First organized, formed or incorporated under the laws of Wisconsin (Spring state or if a gyp.) Sentity the name of the country)	1
on 4/13/2005 (date of organization, formation or incorporation)  (Enter state, or if a non-U.S. entity, the name of the country)  The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization	:
Noble Metals, LLC	
(Enter Name of Florida Limited Liability Company)	
4. If not effective on the date of filing, enter the effective date:  (The effective date: 1) cannot be prior to date of receipt or filed date nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)	e
5. The plan of conversion has been approved in accordance with ss. 605.1041-605.1046.	

Page 1 of 2

Signed this <u>Il</u> day of <u>Time</u>	2014	
Signature of Authorized Representative of Lim	nited Liability Company:	
Signature of Authorized Representative:  Printed Name: Leann Feld+	Title: Member	
Signature(s) on behalf of Other Business Entity:	[See below for required signature(s).]	
Signature: Printed Name: Leann Feld +	Title:Memher	
sil-11	Title: <u>Member</u>	
Signature:Printed Name:	Title:	
Signature: Printed Name:		
Printed Name:	Title:	
Signature:Printed Name:		
Printed Name:	Title:	
Signature:Printed Name:		
Printed Name:	Title:	
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or If Directors or Officers have not been selected, an In	Officer. corporator must sign.	
If Florida General Partnership or Limited Liabili Signature of one General Partner.	ty Partnership:	
If Florida Limited Partnership or Limited Liabili Signatures of ALL General Partners.	ty Limited Partnership:	
All others: Signature of an authorized person.		, ** t
Fees:		12° ;
Articles of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
Noble Metals, 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:  Mailing Address:  Mailing Address:  429 Whispering Oaks Ct.  Sarasuta, FL 34232 Sarasuta, FL 34232
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:  Leann Feld+  Name
Hag Whispering Oaks Ct.  Florida street address (P.O. Box NOT acceptable)  Sarasota FL 34232  City Zip
City 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.
Registered Agent's Signature (REQUIRED)
(CONTINUED)  Page 1 of 2

REOUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penaltimist of perjury that the facts stated herein are true.  am aware that any false information submitted in a document to the Department of State	"AMBR" = Authorized Member "MGR" = Manager  A m B R  Leann Feld t  429 Whispering Oaks Ct. Saraseta FE 34232  A m B R  Neil Feld t  439 Whispering Oaks Ct. Sarasofa FL 34232  Neil Feld t  439 Whispering Oaks Ct. Sarasofa FL 34232  (Use attachment if necessary)  ICLE V: Effective date, if other than the date of filing:	"AMBR" = Authorized Member "MGR" = Manager  A m B R  Leann Feld t  Hag Whispering Oaks Ct.  Sarasota, FC 34232  A m B R  Neil Feld t  Hag Whispering Oaks Ct.  Sarasota, FL 34232  Neil Feld t  Hag Whispering Oaks Ct.  Sarasota, FL 34232  (OPTIONAL)  a effective date is listed, the date must be specific and cannot be more than five business days 90 days after the date of filing.)  ICLE VI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a member or an authorized representative of a member.  (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.  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.)  Leann Feld t	"AMBR" = Authorized Member "MGR" = Manager  A m B R  Leann Feld t  439 Whis pering Daks Ct. Sarasata, FE 34232  A m B R  Neil Feld t  439 Whis pering Oaks Ct. Sarasota, FL 34232  Neil Feld t  439 Whis pering Oaks Ct. Sarasota, FL 34232  (Use attachment if necessary)  ICLE V: Effective date, if other than the date of filing:	"AMBR" = Authorized Member "MGR" = Manager	
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ARTICLE IV-