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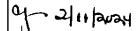




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COVER LETTER

SUBJECT: Nobu Ho	otels Magazine, LLC Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Kara Ellis		
		Name of Person	
	NOBLE Publishing, Inc.		
		Firm/Company	
	7217 Wiregrass Court		
		Address	
	Naples, FL 34114		
		City/State and Zip Code	
	karastudzinski@gmail.com		
	E-mail address: (1	to be used for future annual report notifi	ication)
For further information of	concerning this matter, please ca	all:	
Kara Ellis		201 741-3023 at ()	
Name (of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

TO:

Registration Section Division of Corporations

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

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Nobu Hotels Magazine, LLC	2024 . 130 [11]2: 17
(Name of the Lim	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited	Liability Company were filed on	October 2nd, 2023 and assigned
Florida document number		
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company her	<u>e</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the des	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	<u></u>	
B. If amending the registered agent and/or	0	cords, enter the name of the new registe
agent and/or the new registered office addre	ess here:	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address:	Enter Florid	da street address
New Registered Office Address:	Enter Florid City	da street address, Florida Zip Code

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 relative 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. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	NOBLE Publishing, Inc.	7217 Wiregrass Court	 ≝Add
		Naples, FL 34114	□Remove
AMBR	Benjamin Ellis	7217 Wiregrass Ct.	IBAdd
		Mager, FL 34114	□ Remove
			Change
			□Add
			□ Remove
			Change
			□ Add
			Remove
			Change
			□Add
			□ Remove
			Change
			□ Add
			Remove
			Change

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e record specifies a delayed effective date, but not an effecti	for to date of filing or more than 90 days after filing.) Pursuant to 605.0207 blicable statutory filing requirements, this date will not be listed as
e record specifies a delayed effective date, but not an effecti	
rd is filed.	e time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
January 24th 2024 Dated	
Dated,,	•
Signature of a member or	