23000 550 864

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
W23000165738	

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FILED 2023 DEC 12 PH 4: 15

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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE_12/12/2023

 $\sum_{i=1}^{n}$

WALK IN

ENTITY NAME Tournament Players Club of Michigan, Inc.

DOCUMENT NUMBER_____

PLEASE FILE THE ATTACHED AND RETURN

XXXXXXXXX

Plain Copy Certified Copy Certificate of Status

PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY

Certified Copy of Arts & Amendments Certificate of Good Standing

APOSTILLE' / NOTARIAL CERTIFICATION

TOTAL OWED \$150

ACCOUNT #: I20160000072

5.8 416

Please call Tina at the above number for any issues or concerns. Thank you so much!

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Articles of Conversion For "Other Business Entity" Into Florida Limited Liability Company

The Articles of Conversion and attached Articles of Organization 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: Tournament Players Club of Michigan, Inc.

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a <u>Corporation</u> (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of

(Enter state, or if a non-U.S. entity, the name of the country)

on 11/01/2007 (date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Tournament Players Club of Michigan, LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date:______12/15/23 at 11:57pm EST (The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar 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

5. The plan of conversion has been approved in accordance with all applicable statutes.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.



Signed this <u>11th</u> day of <u>December</u>	20_23	
Signature of Authorized Representative of Limited Liability Company:		
Signature of Authorized Representative:	Title: Authorized Representative	
Signature(s) on behalf of Other Business Entity:		
Signature: <u>Free Carlos</u> Printed Name: James C. Triola	Title: President	
Signature:		
Signature:	Title:	
Signature:		
Signature: Printed Name:	Title:	
Signature: Printed Name:		
Printed Name:	Tide:	
Signature:		
Printed Name:	l'itle:	
Signature:	Title	
Printed Name:		
Printed Name:	Title:	
Printed Name:	Title:Officer.	
Printed Name:	Title: Officer. corporator must sign.	
Printed Name: <u>If Florida Corporation:</u> Signature of Chairman. Vice Chairman, Director, or If Directors or Officers have not been selected, an In	Title: Officer. corporator must sign.	
Printed Name: <u>If Florida Corporation:</u> Signature of Chairman. Vice Chairman, Director, or If Directors or Officers have not been selected, an In <u>If Florida General Partnership or Limited Liabil</u>	Title: Officer. acorporator must sign. ity Partnership:	
Printed Name: <u>If Florida Corporation:</u> Signature of Chairman. Vice Chairman, Director, or If Directors or Officers have not been selected, an In <u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner. <u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners. <u>All others:</u>	Title: Officer. acorporator must sign. ity Partnership:	
Printed Name: <u>If Florida Corporation:</u> Signature of Chairman. Vice Chairman, Director, or If Directors or Officers have not been selected, an In <u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner. <u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners.	Title: Officer. acorporator must sign. ity Partnership:	
Printed Name: <u>If Florida Corporation:</u> Signature of Chairman. Vice Chairman, Director, or If Directors or Officers have not been selected, an In <u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner. <u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners. <u>All others:</u>	Title: Officer. corporator must sign. ity Partnership:	
Printed Name: <u>If Florida Corporation:</u> Signature of Chairman. Vice Chairman, Director, or If Directors or Officers have not been selected, an In <u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner. <u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners. <u>All others:</u> Signature of an authorized person.	Title: Officer. corporator must sign. ity Partnership:	
Printed Name: <u>If Florida Corporation:</u> Signature of Chairman. Vice Chairman, Director, or If Directors or Officers have not been selected, an In <u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner. <u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners. <u>All others:</u> Signature of an authorized person. <u>Fees:</u> Articles of Conversion: Fees for Florida Articles of Organization:	Title: Officer. corporator must sign. ity Partnership: ity Limited Partnership: \$25.00 \$125.00	
Printed Name: <u>If Florida Corporation:</u> Signature of Chairman. Vice Chairman, Director, or If Directors or Officers have not been selected, an In <u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner. <u>If Florida Limited Partnership or Limited Liabili</u> Signatures of <u>ALL</u> General Partners. <u>All others:</u> Signature of an authorized person. <u>Fees:</u> Articles of Conversion:	Title:Officer. corporator must sign. ity Partnership: ity Limited Partnership: \$25.00	

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Tournament Players Club of Michigan, LLC

(Must contain 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:
1 PGA TOUR Blvd.	5150 Palm Valley Rd.
Ponte Vedra Beach, FL 32082	Ponte Vedra Beach, FL 32082

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:

Corporation Service Co	mpany
	Name
1201 Hays Street	
Florida street address	s (P.O. Box <u>NOT</u> acceptable)
Tallahassee	FL 32301
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. Thereby accept the appointment as registered agent and agree to act in this capacity. Tfurther 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)



ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	PGA TOUR Investments Finance, LLC
	110 Championship Way
	Ponte Vedra Beach, FL 32082
(Use attachment if necessary)	

ARTICLE V: Other provisions, if any.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, 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.

James C. Triola

Typed or printed name of signee Filing Fees \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)