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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusilless Entity Parile)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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CORPORATE ACCESS,

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: MISTY 12/20 XX**CERTIFIED COPY PHOTOCOPY CUS** XXFILING CONVERSION 1. NOBLE RESORTS, LLC (CORPORATE NAME AND DOCUMENT #) 2. (CORPORATE NAME AND DOCUMENT #) 3. (CORPORATE NAME AND DOCUMENT #) 4. (CORPORATE NAME AND DOCUMENT #) 5. (CORPORATE NAME AND DOCUMENT #) 6. (CORPORATE NAME AND DOCUMENT #) SPECIAL INSTRUCTIONS:

COVER LETTER

TO:	New Filing S Division of C					
SHRI	JECT:	No	oble Resorts, L	LC		
3010		(Name of Res	sulting Florida Lim	ited Con	npany)	
					d fees are submitted to conceordance with s. 605.104	
Please	return all corr	espondence concernin	g this matter to:			
		Anthony Lebron				2024 777 20
		(Contact Person)		_		c .
	LATH	IAM & WATKINS LL	P	_		
		(Firm/Company)				2
	355	S. Grand Ave., S-10	0	_		.>
		(Address)				<u>ب</u> ا
	Los	Angeles, CA 90071				, , -
	((City, State and Zip Code)		_		
		futset@theberkleygrou	pine.com			
E-r	nail Address: (to b	e used for future annual re	port notifications)	_		
For fu	irther informati	on concerning this ma	tter, please call:			
	Anthor	ny Lebron	_at (213)	485-1234	
	(Name of Conta	ect Person)) (Day	rtime Telephone Number)	
		or the following amou a bank located in the		process	sed by this office must be	payable in US
(\$25 fc & \$125	0.00 Filing Fees or Conversion 5 for Articles anization)	S155.00 Filing Fees and Certificate of Status	S\$180.00 Filing and Certified Co	-	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New I Divisi The C 2415	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 8 nassee, FL 32303	10

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 provided Noble Resorts Corporation	rior to the filing of the Articles of	Conversion	ı is:
(Enter Name of Other Business E	intity)		
2. The "Other Business Entity" is a	Corporation		
(Enter entity type. Example: corporation, limited partner	ership, general partnership, common law	or business tr	rust, etc.)
First organized, formed or incorporated under the laws of(Enter	Florida	r-3	_
(Ente	er state, or if a non-U.S. entity, the name	of the countr	y)
on(date of organization, formation or incorporation)			1
(date of organization, formation or incorporation)		ري .	•
3. The name of the Florida Limited Liability Company as s	et forth in the attached Articles	of Organiz	ation:
Noble Resorts, LLC	Company)	. *** . 5)
(Enter Name of Florida Limited Liability C	Company)		
4. If not effective on the date of filing, enter the effective de (The effective date: Cannot be prior to date of receipt or	ate:		
(The effective date: Cannot be prior to date of receipt or the date this document is filed by the Florida Departmet Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records.	nt of State.)		
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 which such members are entitled under ss. 605.1006 and 60		ghts the amo	ount to

Signature of Authorized Representative: Signature of Authorized Representative: Printed Name: Signature(s) on behalf of Other Business Entity: Signature: Frank Uset Frank Uset Signature: Frank Uset Frank Uset Signature: Frank Uset Frank Uset Frank Uset Frank Uset Frank Uset Title: Vice President and Secretary Title: Signature: Printed Name: Signature: Printed Name: Title: Signature: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partners. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others:	Signed this20 day of _	December	2024	<u>.</u>
Signature of Authorized Representative: Printed Name: Frank Uset Frank Utile: Authorized Person	Signature of Authorized Repo	resentative of Limi		ty Company:
Signature: Frank Utst Frank Utst Frank Utst Frank Utst	Signature of Authorized Repres	centative:	= :	
Signature: Frank Utst Frank Utst Frank Utst Frank Utst	Printed Name: Fra	ank Utset	8270C1CF2533415	Authorized Person
Signature: Frank Ulset Frank Ulset Title: Vice President and Secretary	Trinted Name:			
Signature: Printed Name: Frank Uset Printed Name: Frank Uset Printed Name: Title: Vice President and Secretary Signature: Printed Name: Title: Signature: Printed Name: Signature: Printed Name	<u>—</u> ,	lance di lance di lance		
Signature: Printed Name: Signature: Printed Name: Title: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partners. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others:	Signature:	rank Utset		
Signature: Printed Name: Signature: Printed Name: Title: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partners. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others:	Printed Name: Fra	127001CF7533415 ank Utset	Title:	Vice President and Secretary
Signature: Printed Name: Signature: Printed Name: Title: If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officer. If Directors or Officers have not been selected, an Incorporator must sign. If Florida General Partnership or Limited Liability Partnership: Signature of one General Partners. If Florida Limited Partnership or Limited Liability Limited Partnership: Signatures of ALL General Partners. All others:				
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	Signatures of <u>ALL</u> General Parti	ners.		
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Signature of an authorized percen		n		
Signature of an authorized person.	Signature of all authorized perso	ш.		
<u>Fees:</u>	<u>Fees:</u>			
Articles of Conversion: \$25.00	Articles of Conversion:		\$25.00	
Fees for Florida Articles of Organization: \$125.00		s of Organization:		
Certified Copy: \$30.00 (Optional)		o o o gammarom		optional)
Certificate of Status: \$5.00 (Optional)	• •			-

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April 1980 April 1980 April 1980

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Noble Resorts, 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:
2626 E Oakland Park Blvd. 6th Flr. Fort Lauderdale, FL 33306	2626 E Oakland Park Blvd. 6th 🖬

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:

COGENCY GI	LOBAL INC.
Nam	ne
115 NORTH CALHOU	IN STREET, SUITE 4
Florida street address (P.C	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. 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..

Joe Morris – Asst Secretary – Cogency Global Inc. Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	The Berkley Group, Inc.
	2626 E Oakland Park Blvd. 6th Flr.
	Fort Lauderdale, FL 33306
	ን
	
(Use attachment if necessary)	;
(Use attachment if necessary) LE V: Other provisions, if any.	
LE V: Other provisions, if any.	DecuSigned by:
•	
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance.	Oocusioned by: Frank Utsit
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S.	Frank Utset ar an authorized representative of a member with section 605.0203 (1) (b), Florida Statutes, I am awar
REQUIRED SIGNATURE: Signature of a member of This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S. The	Frank Uted n272010C72533415 r an authorized representative of a member ce with section 605.0203 (1) (b), Florida Statutes. I am awar cument to the Department of State constitutes a third degree