# 124000527689

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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# CORPORATE ACCESS,

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

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(850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

# **WALK IN**

PICK UP:

MISTY 12/20

X	CERTIFIED COPY		
	РНОТОСОРУ		
	CUS		202
X	FILING	CONVERSION	
В	BERKLEY VACATION	RESORTS. LLC	()
((	CORPORATE NAME AND DOC	UMENT#)	2:57
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#### **COVER LETTER**

10:	New Filing S Division of C						
SUBJ	FCT·	Berkley	Vacation f	Resoi	rts, Ll	_C	
50150		(Name of Res	sulting Florida	Limit	ed Con	npany)	
						d fees are submitted to corecordance with s. 605.104:	
Please	return all corr	espondence concernin	g this matte	r to:			
		Anthony Lebron					26
		(Contact Person)					124
	LATH	IAM & WATKINS LL	P				7024 ETC T
		(Firm/Company)					ر با د با
	355	S. Grand Ave., S-10	0				
		(Address)					:
	Los	Angeles, CA 90071					<del>اس</del> ن
		City, State and Zip Code)					• • • • • • • • • • • • • • • • • • • •
	futset@the	berkleygroupinc.com					
E-n		e used for future annual re	port notificati	ons)			
		on concerning this ma					
	Anthor	ny Lebron	_at (21	3	)	485-1234	
	(Name of Conta	ict Person)	ar ((Area	Code)	(Day	time Telephone Number)	
		or the following amou a bank located in the	int: (All che	ecks p		sed by this office must be p	payable in US
(\$25 fo & \$125	0.00 Filing Fees or Conversion of for Articles anization)	S155.00 Filing Fees and Certificate of Status	⊠\$180.00 and Certific			☐\$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 forporations 7			New I Divisi The C 2415	Address: Filing Section ion of Corporations lentre of Tallahassee N. Monroe Street, Suite 81 hassee, FL 32303	0

#### **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 pr Berkley Vacation Resorts, Inc	_	s of Conversion	is:
(Enter Name of Other Business E	ntity)		
2. The "Other Business Entity" is a	Corporation	20.5	
(Enter entity type. Example: corporation, limited partne.	rship, general partnership, common	law or business tru	ist, etc.
First organized, formed or incorporated under the laws of	Florida	5	- ,
(Ente	er state, or if a non-U.S. entity, the n	ame of the country	')
on		:	
(date of organization, formation or incorporation)			زر
3. The name of the Florida Limited Liability Company as so	et forth in the attached Artic	les of Organiza	tion:
Berkley Vacation Resorts, LLC	2		
(Enter Name of Florida Limited Liability C	Company)		
4. If not effective on the date of filing, enter the effective da	December 30, 2024		
(The effective date: Cannot be prior to date of receipt or the date this document is filed by the Florida Departmen Note: If the date inserted in this block does not meet the applicable stat document's effective date on the Department of State's records.	filed date nor more than 90 it 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		l rights the amou	int to

Signed this day of December	20
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Frank Printed Name: Frank Utset	EA. UtastTitle:Authorized Person
Signature(s) on bobalf of Other Business Entities	
Signature: Frank A. Utset  Printed Name: Frank Utset	
Printed Name: Frank Utset	Title: Vice President and Secretary
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signature:	
Printed Name:	_ Title:
If Florida Corporation:	oor
Signature of Chairman, Vice Chairman, Director, or of Directors or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabilia Signature of one General Partner.	ty Partnersnip:
If Florida Vimited Danta makin and Limited Liabiliti	ter Limited Dantagnahin.
If Florida Limited Partnership or Limited Liability Signatures of <u>ALL</u> General Partners.	
All others: Signature of an authorized person.	
<u>Fees:</u>	
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

Berkley Vacation F	Resorts LLC
(Must contain the words "Limited Liabili	
ARTICLE II - Address: The mailing address and street address of the p	orincipal 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 Fl Fort Lauderdale, FL 33306
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	d Office, & Registered Agent's Signature;
	- wistored agent area
The name and the Florida street address of the	registered agent are:

Name

115 NORTH CALHOUN STREET, SUITE 4

Florida street address (P.O. Box NOT 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)

	13.5	***	-			
А	К	ı	( .	L،ŀ	11	/ -

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

<u>Fitle:</u>	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager AMBR	The Berkley Group, Inc.
AMDIX	2626 E Oakland Park Blvd. 6th Flr
	Fort Lauderdale, FL 33306
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LE V: Other provisions, if any.  REQUIRED SIGNATURE:  Frank	
REQUIRED SIGNATURE:  Frank  Signature of a member o	r an authorized representative of a member
REQUIRED SIGNATURE:  Frank  Signature of a member of This document is executed in accordance.	
REQUIRED SIGNATURE:  Frank  Signature of a member of a member of any false information submitted in a document as provided for in s.817.155, F.S.	r an authorized representative of a member
REQUIRED SIGNATURE:  Frank  Signature of a member of a member of a member of any false information submitted in a document as provided for in s.817.155, F.S.  The	r an authorized representative of a member see with section 605.0203 (1) (b). Florida Statutes. I am aw nument to the Department of State constitutes a third degree