L24000527714

(Requestor's Name)
(10400000)
(Address)
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(City/State/Zip/Phone #)
, ,
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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Office Use Only



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12/26/24--01003--008 *** \$900.00

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

	CERTIFIED COPY			
	РНОТОСОРУ		5.53.5	
	CUS		; ; ;	
XX	FILING	CONVERSION	:	
		TITLE & ESCROW SERVICES, LLC	. :	
((CORPORATE NAME AND DOC	CUMENT #)		
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COVER LETTER

TO:	New Filing S Division of C						
SUB.	JECT:	Vacation Village	e Title	& Escre	ow Sen	vices, LLC	
5017		(Name of Res	sulting I	Florida Lir	nited Cor	npany)	
				_		nd fees are submitted to conceordance with s. 605,1045	
Pleas	e return all corr	espondence concernin	g this	matter to	:		
		Anthony Lebron					2024 (") - >
		(Contact Person)					زج
	LATH	HAM & WATKINS LL	.P) ,
		(Firm/Company)					
	355	S. Grand Ave., S-10	0				. 5
		(Address)					L4 15
	Los	Angeles, CA 90071					77
	(City, State and Zip Code)					
	futset@tl	neberkleygroupinc.com					
E-r	mail Address: (to b	pe used for future annual re	port not	tifications	,		
For fi	urther informati	ion concerning this ma	tter, pl	lease call	:		
	Antho	ny Lebron	at (213)	485-1234	
	(Name of Conta	act Person)	_ _	(Area Coc	le) (Day	ytime Telephone Number)	
		for the following amou a bank located in the			proces:	sed by this office must be p	ayable in US
(\$25 fo & \$12	50.00 Filing Fees or Conversion 5 for Articles (anization)	☐\$155.00 Filing Fees and Certificate of Status		80.00 Fili Certified C	-	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status	
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee.	ection Corporations 27			New Divis The C 2415	t Address: Filing Section ion of Corporations Centre 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 and attached Articles of Organi "Other Business Entity" into a Florida Limited Liability C			
Statutes.			202
The name of the "Other Business Entity" immediately price Vacation Village Title & Escrow Service		s of Con	.4. *
(Enter Name of Other Business Enti	ity)		
2. The "Other Business Entity" is a	Corporation		• !
(Enter entity type. Example: corporation, limited partnersl	hip. general partnership, common	law or bu	usin e ss trust, et
First organized, formed or incorporated under the laws of	Florida		71
(Enter	state, or if a non-U.S. entity, the i	name of th	ne country)
on 11/14/2022			
(date of organization, formation or incorporation)			
3. The name of the Florida Limited Liability Company as set	forth in the attached Artic	les of O	rganization
Vacation Village Title & Escrow Service	es, LLC		
(Enter Name of Florida Limited Liability Co	ompany)		
4. If not effective on the date of filing, enter the effective date	December 30, 2024		
(The effective date: Cannot be prior to date of receipt or fi the date this document is filed by the Florida Department	nea date not more man 30	calend:	ar days afte
Note: If the date inserted in this block does not meet the applicable statut document's effective date on the Department of State's records.		will not b	e listed as the
5. The plan of conversion has been approved in accordance w	ith 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 con c	day ofDec	cember	20	24	<u></u>
Signature of Authoriz	ed Representati	ve of Limite	ed Liab	ility C	<u>lompany:</u>
Signature of Authorized Printed Name:	I Representative:	: Fran	KA.	Uta	Authorized Person
rrinted Name:	1 FBIIN OUSEL		i ilie: _		Admonzed Ferson
Signature(s) on behalf			ee helo	w for i	required signature(s)]
Signature: Frank	A. Utset				
Signature: Printed Name:	Frank Utset		Title: _	Vic	e President and Secretary
Signature:					
Printed Name:			Title: _		.
Signature:					
Printed Name:			Title: _		
Signature:					
Printed Name:			Title: _		
Printed Name:			Title:		
Signature: Printed Name:			Title:		
If Florida Corporation: Signature of Chairman, \(\)		Director, or O	fficer.		
If Directors or Officers h				r must	sign.
If Florida General Part	tnership or Limi	ted Liability	Partne	rshin:	
Signature of one Genera					•
If Flo <u>rida Limited Part</u>	norchin or Limi	ted Liability	Limite	d Pari	norchin:
Signatures of <u>ALL</u> Gene			Dillitt	u i ai	iic i siiipi
Allothors					
All others: Signature of an authorize	ed person.				
Food					
Fees:					
Articles of Conv			\$25.00	0	
	Articles of Orga		\$125.0		anal)
Certified Copy: Certificate of St	atus:		\$30.00 \$5.00 (•	
Continuate of St			vv (~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	,

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

Vacation Village Title & Escrow Services, 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 Fl Fort Lauderdale, FL 33306
Foit Laudeidale, FL 55500	Torr Lauderdale, 1 L 33300

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 GLO	DBAL INC.
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)

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

"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	The Berkley Group, Inc.
7 (III E) (2626 E Oakland Park Blvd. 6th Flr.
	Fort Lauderdale, FL 33306
	<u> </u>
Use attachment if necessary)	
(Use attachment if necessary) LE V: Other provisions, if any.	
•	
LE V: Other provisions, if any. REQUIRED SIGNATURE:	
LE V: Other provisions, if any.	taet
REQUIRED SIGNATURE: Frank A. Utc. Signature of a member or This document is executed in accordance.	an authorized representative of a member e with section 605.0203 (1) (b). Florida Statutes. I am awaument to the Department of State constitutes a third degree
REQUIRED SIGNATURE: Frank A. Uto Signature of a member or This document is executed in accordance any false information submitted in a document as provided for in s.817.155, F.S.	an authorized representative of a member e with section 605.0203 (1) (b). Florida Statutes. I am awaument to the Department of State constitutes a third degree
REQUIRED SIGNATURE: Frank A. Utc. Signature of a member or This document is executed in accordance any false information submitted in a document provided for in s.817.155, F.S. The	an authorized representative of a member e with section 605.0203 (1) (b). Florida Statutes. I am awaument to the Department of State constitutes a third degree