

# M14000006606

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W14-55737 need consent

Office Use Only



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09/11/14--01001--020 \*\*155.00

FILED  
2014 SEP 10 AM 9:24  
CLERK OF SUPERIOR COURT  
TALLAHASSEE, FLORIDA  
RECEIVED  
16 SEP 10 PM 4:33  
DIVISION OF CORPORATE FILINGS

K. SALY  
EXAMINER  
SEP 16 2014

CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

**FILING COVER SHEET**  
**ACCT. #FCA-23**

**CONTACT:** Kim Weidenbach

**DATE:** 09/10/14

**REF. #:** 9271511

**CORP. NAME:** NOBLE NET LEASE HOLDINGS, LLC

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION        | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT                    | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME         |
| <input checked="" type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input type="checkbox"/> LIMITED LIABILITY       |
| <input type="checkbox"/> REINSTATEMENT                    | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL              |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION      |   |  |
| <input type="checkbox"/> OTHER:                           |   |  |

STATE FEES PREPAID WITH CHECK# 700 27108 FOR \$ 155.00

**AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:**

\_\_\_\_\_ **COST LIMIT: \$** \_\_\_\_\_

**PLEASE RETURN:**

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS     |   |   |

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 12, 2014

CORPDIRECT AGENTS, INC.

SUBJECT: NOBLE NET LEASE HOLDINGS, LLC  
Ref. Number: W14000055737

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE  
9/10/14

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE  
9/10/14

We have received your document for NOBLE NET LEASE HOLDINGS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly  
Regulatory Specialist II

Letter Number: 514A00019556

RECEIVED  
2014 SEP 15 PM 4:32  
SUNBIZ  
FILING

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE

PLEASE GIVE ORIGINAL SUBMISSION  
DATE AS FILE DATE  
9/10/14

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Noble Net Lease Holdings, LLC**

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

**Lisa Kiss**

Name of Person

**Noble Management Company**

Firm/Company

**4280 Professional Center Dr, Suite 100**

Address

**Palm Beach Gardens, FL 33410**

City/State and Zip Code

**lisa@noblep.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Cristian J. Fernandez**

Name of Contact Person

at ( **561** )

Area Code

**966-0070**

Daytime Telephone Number

**MAILING ADDRESS:**

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

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy

☐ \$160.00 Filing Fee, Certificate  
of Status & Certified Copy



PROPERTIES

4280 PROFESSIONAL CENTER DRIVE, SUITE 100

PALM BEACH GARDENS, FLORIDA 33410

P. 561.966.0700 F. 561.966.0260

September 15, 2014

To whom it may concern:

Noble Net Lease Holdings, LLC was filed as a domestic entity in Florida in error. Noble Net Lease Holdings, LLC is a domestic entity in Delaware. We voluntarily dissolved the domestic entity in Florida and are now trying to file this entity as a foreign entity in Florida.

Noble Net Lease Holdings, LLC hereby gives permission to the State of Florida to allow the filing of Noble Net Lease Holdings, LLC as a foreign entity in Florida.

Noble Net Lease Holdings, LLC,  
a Delaware limited liability company

By:   
Traci D. Ambrosino, Manager

FILED  
2014 SEP 10 AM 9:24  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Noble Net Lease Holdings, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_

(FEI number, if applicable)

4. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. Traci L. Ambrosino

4280 Professional Center Dr, Suite 100, Palm Beach Gardens, FL 33410

(Street Address of Principal Office)

6. Same

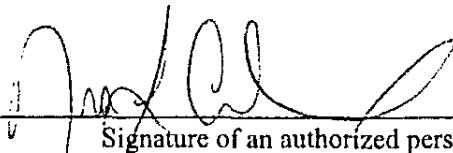
(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Traci L. Ambrosino, Manager, 4280 Professional Center Dr, Suite 100, Palm Beach Gardens, FL 33410

Paul Forberger, Manager, 4280 Professional Center Dr, Suite 100, Palm Beach Gardens, FL 33410

8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)



Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

Traci L. Ambrosino

Typed or printed name of signee

FILED  
2014 SEP 10 AM 9:24  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

**Noble Net Lease Holdings, LLC**

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

**Cristian J. Fernandez**

(Name)

**4280 Professional Center Drive, Suite 100**

Florida Street Address (P.O. Box NOT ACCEPTABLE)

**Palm Beach Gardens**

**FL 33410**

City/State/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, Florida Statutes.*

(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

FILED  
2014 SEP 10 AM 9:24  
CLERK OF THE COURT  
PALM BEACH COUNTY, FLORIDA

# Delaware

PAGE 1

*The First State*

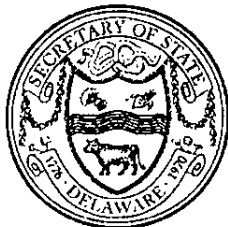
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NOBLE NET LEASE HOLDINGS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TENTH DAY OF SEPTEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NOBLE NET LEASE HOLDINGS, LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF AUGUST, A.D. 2014.

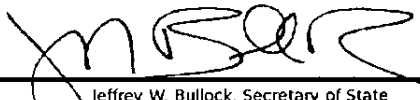
AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5595115 8300

141162712



You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1685978

DATE: 09-10-14