

M20000001124

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

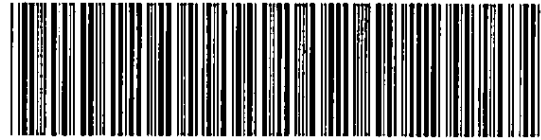
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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01/16/20--01/15--005 **130.00

FILED
2020 JAN 16 P 11 52
T. L. F. J. E. R. J.
JAN 28 2020
STATE OF MASSACHUSETTS
TREASURY

LAW OFFICE OF CARLO J. CAMPOREALE, LLC

**2 North Street
Suite 1B
Waldwick, New Jersey 07463
Telephone: (201) 962-9777
Facsimile: (201) 762-1385**

**225 North Route 303
Suite 201
Congers, New York 10920
Telephone: (845) 450-5156
Facsimile: (201) 762-1385**

Member of New Jersey and New York Bars

January 15, 2020

VIA OVERNIGHT MAIL

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

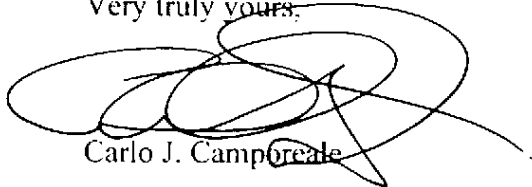
**RE: Foreign Registration Application for a
Limited Liability Company—Noble Development and Holding Corp LLC**

Dear Sir/Madam:

Enclosed for filing please find Foreign Registration for Noble Development and Holding Corp LLC, using the alternate name in Florida of Noble Development and Holding LLC; a Certificate of Good Standing from the State of Delaware; and a check made payable to "Florida Department of State" in the amount of \$130.00

Please file the Foreign Registration. Should you have any questions, please contact my office. Thank you for your attention and courtesies.

Very truly yours,



Carlo J. Camporeale

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Noble Development and Holding Corp 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:

Carlo J. Camporeale, Esq.

Name of Person

Law Office of Carlo J. Camporeale LLC

Firm/Company

2 North Street, Suite 2C

Address

Waldwick, New Jersey 07463

City/State and Zip Code

ccamporeale@cjllc.com

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

For further information concerning this matter, please call:

Carlo J. Camporeale

201

962-9777

at ()

Name of Contact Person

Area Code

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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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

FILED
2020 JAN 16 PM 5:52
TALLAHASSEE, FL
SECRET

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

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

1. Noble Development and Holding Corp LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Noble Development and Holding 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 3. 84-3536655
(Jurisdiction under the law of which foreign limited liability company is organized) (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. 48 Pavilion Avenue 6. 48 Pavilion Avenue
(Street Address of Principal Office) (Mailing Address)
Suite 2 Suite 2
Long Branch, New Jersey 07740 Long Branch, New Jersey 07740

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee 32301
_____, Florida _____
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Roxanne Turner
Asst. Vice President

(Registered agent's signature)

FILED
2020 JAN 16 P 11 52
TALLAHASSEE
FLORIDA

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

☒ Manager Name: Drew Barile
☐ Member Address: 48 Pavilion Avenue
☐ Authorized Suite 2
Person Long Branch, New Jersey 07740
☐ Other ☐ Other

☒ Manager Name: Lorne Schechter
☐ Member Address: 48 Pavilion Avenue
☐ Authorized Suite 2
Person Long Branch, New Jersey 07740
☐ Other ☐ Other

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ Other ☐ Other

Title or Capacity: **Name and Address:**

☒ Manager Name: Eric Wolf
☐ Member Address: 48 Pavilion Avenue
☐ Authorized Suite 2
Person Long Branch, New Jersey 07740
☐ Other ☐ Other

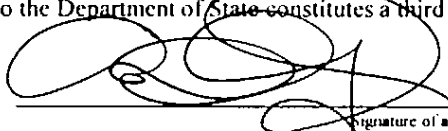
☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ Other ☐ Other

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ Other ☐ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.



Signature of an authorized person

Carlo J. Camporeale

Typed or printed name of signer

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NOBLE DEVELOPMENT AND HOLDING CORP 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 FIFTH DAY OF DECEMBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NOBLE DEVELOPMENT AND HOLDING CORP LLC" WAS FORMED ON THE THIRTIETH DAY OF OCTOBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



7679153 8300

SR# 20198446644

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 204141056

Date: 12-05-19