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(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:





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ECRETARY OF STATE TALLAHASSEF, ET

FILED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 670252 8284021 AUTHORIZATION : COST LIMIT ORDER DATE: May 11, 2022 ORDER TIME : 2:44 PM ORDER NO. : 670252-010 CUSTOMER NO: 8284021 DOMESTIC AMENDMENT FILING NAME: LAGUNA RIVIERA HOLDINGS LLC EFFECTIVE DATE: XX ARTICLES OF CONVERSION AND ORGANIZATION RESTATED ARTICLES OF INCORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Alexxis Weiland -- EXT#

COVER LETTER

TO: New Filing Division of	Section Corporations		
SURTECT: Lagur	a Riviera Holdings LLC		
30bJEC1	(Name of Re	sulting Florida Limited Con	npany)
			d fees are submitted to convert an "Other coordance with s. 605.1045, F.S.
Please return all co	orrespondence concernin	g this matter to:	
Michael H. Narlinge	r		
	(Contact Person)	<u> </u>	
c/o Silverman Sche	rmer, PLLC		
	(Firm/Company)		
401 E. Las Olas Blv	d., Suite 1400		
	(Address)		
	(City, State and Zip Code)	<u> </u>	
Fort Lauderdale, FL	. 33301		
E-mail Address: (o be used for future annual re	port notifications)	
For further inform	ation concerning this ma	tter, please call:	
(Name of Co	entact Person)	at () (Area Code) (Day	ytime Telephone Number)
Enclosed is a chec	·	int: (All checks proces	sed by this office must be payable in US
\$150.00 Filing Fee (\$25 for Conversion & \$125 for Articles of Organization)	and Certificate of Status	□\$180.00 Filing Fees and Certified Copy	☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
P.O. Box 6	g Section f Corporations	New Divis The C	t Address: Filing Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

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2022 MAY 11 AM 11: 44

SECRETARY OF STATE TALLAHASSEE. FL

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.

 The name of the "Other Business Entity" im- Laguna Riviera Holdings LLC 	mediately prior to the filing of the Articles of Conversion is:
_ •	her Business Entity)
2. The "Other Business Entity" is a Limited Liab	oility Company
(Enter entity type. Example: corporation,	limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the	California he laws of (Enter state, or if a non-U.S. entity, the name of the country)
	(Enter state, or if a non-o.s. entry, the name of the country)
on(date of organization, formation or incorporation)	
3. The name of the Florida Limited Liability Co	ompany as set forth in the attached Articles of Organization:
Laguna Riviera Holdings LLC	
(Enter Name of Florida Lim	nited Liability Company)
4. If not effective on the date of filing, enter the	
the date this document is filed by the Florida	
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's re-	applicable statutory filing requirements, this date will not be listed as the ecords.
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 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 4th day of May	20 22 .
Signature of Authorized Representative of Limi	ted Liability Company:
Signature of Authorized Representative: Printed Name: Michael H. Narlinger	Title Manager
Signature(s) on behalf of Other Business Entity:	·
Signature:	
Signature: Michael H. Narlinger	Title: Manager
Signature:	
Printed Name:	_ Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
Signature:	
Signature:Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or	
If Directors or Officers have not been selected, an Inc	corporator must sign.
<u>If Florida General Partnership or Limited Liabili</u> Signature of one General Partner.	ty Partnership:
If Florida Limited Partnership or Limited Liabili Signatures of <u>ALL</u> General Partners.	tv Limited Partnership:
All others: Signature of an authorized person.	
Fees:	
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

The name of	the Limited Liability Company is:	
Laguna Rivier	ra Holdings LLC	
	(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE I	I - Address:	

The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address:

ARTICLE I - Name:

Mailing Address:

c/o Silverman Schermer PLLC	c/o Silverman Schermer PLLC
401 E. Las Olas Blvd., Suite 1400	401 E. Las Olas Blvd., Suite 1400
Fort Lauderdale, FL 33301	Fort Lauderdale, FL 33301

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:

Steven J. Schermer		TAI TAI
Nar	me	THE REPORT OF THE PARTY OF THE
401 E. Las Olas Blvd., Suite	1400	HAR I
Florida street address (P.	O. Box NOT acceptable)	SSE B
Fort Lauderdale	FL 33301	rs = D
City	Zip	FL

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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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
MGR	Michael H. Narlinger	<u></u>	
	401 E. Las Olas Blvd., Suite 1400		
	Fort Lauderdale, FL 33301		
			
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		The state of the s	F*
(Use attachment if necessary)			
CLE V: Other provisions, if any.			
REQUIRED SIGNATURE:	10		
- Miss	15		
	// r an authorized representative of a memb		
C'			

Typed or printed name of signce

Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$30.00 Certified Copy (Optional)

\$5.00 Certificate of Status (Optional)

ARTICLE IV-

Michael H. Narlinger