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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

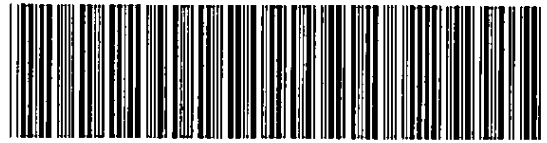
(Business Entity Name)

(Document Number)

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

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9/14/20

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

87 OAK VILLAGE BOULEVARD LLC

**SUBJECT:** \_\_\_\_\_  
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:

Gregg H. Rudolph

\_\_\_\_\_  
Name of Person

Rudolph Group LLC

\_\_\_\_\_  
Firm/Company

4777 137th Street West

\_\_\_\_\_  
Address

Apple Valley, MN 55124

\_\_\_\_\_  
City/State and Zip Code

gregg.rudolph@rudolphgroup.net

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

For further information concerning this matter, please call:

Gregg Rudolph

952

423-2285

\_\_\_\_\_  
Name of Contact Person at (\_\_\_\_\_) \_\_\_\_\_  
Area Code Daytime Telephone Number

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

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**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:

87 OAK VILLAGE BOULEVARD LLC

1. \_\_\_\_\_  
(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.")  
State of Minnesota

2. \_\_\_\_\_ (Jurisdiction under the law of which foreign limited liability company is organized)      3. \_\_\_\_\_ (FEI number, if applicable)

January 1, 2020

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

4777 137th Street West

5. \_\_\_\_\_  
(Street Address of Principal Office)

Apple Valley, MN 55124

6. \_\_\_\_\_  
(Mailing Address)

USA

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

Name: H. Herbert Rudolph

2023 Sawgrass Trail

Office Address: \_\_\_\_\_

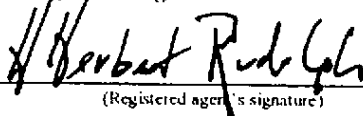
Sebring \_\_\_\_\_ 33872

\_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip code)

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**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.



(Registered agent's signature)

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:**  Manager  
**Name and Address:**  
 Name: Gregg H. Rudolph  
1777 137th Street West, Apple Valley, MN 55121  
 Address: \_\_\_\_\_  
 Member  
 Authorized Person  
 Other \_\_\_\_\_

**Title or Capacity:**  Manager  
**Name and Address:**  
 Name: Cinda H. Rudolph  
1777 137th Street West, Apple Valley, MN 55121  
 Address: \_\_\_\_\_  
 Member  
 Authorized Person  
 Other \_\_\_\_\_

Manager  
**Name and Address:**  
 Name: Rebecca G. Wambheim  
1841 Hamlet Ave Richfield MN 55423  
 Address: \_\_\_\_\_  
 Member  
 Authorized Person  
 Other \_\_\_\_\_

Manager  
**Name and Address:**  
 Name: Bradley G. Rudolph  
6711 Sherida Avenue South Richfield MN 55121  
 Address: \_\_\_\_\_  
 Member  
 Authorized Person  
 Other \_\_\_\_\_

Manager  
**Name and Address:**  
 Name: Rachel A. Rudolph  
1400 E Riverside Dr Austin TX 78741 USA  
 Address: \_\_\_\_\_  
 Member  
 Authorized Person  
 Other \_\_\_\_\_

Manager  
**Name and Address:**  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Member  
 Authorized Person  
 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.

Gregg H. Rudolph  
 Signature of an authorized person

Gregg H. Rudolph

Typed or printed name of signer

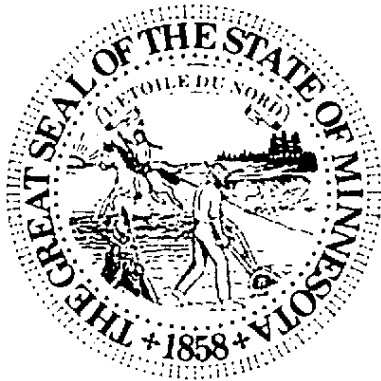
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**Office of the Minnesota Secretary of State  
Certificate of Good Standing**

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: 87 Oak Village Boulevard LLC  
Date Filed: 01/08/2020  
File Number: 1132865800025  
Minnesota Statutes, Chapter: 322C  
Home Jurisdiction: Minnesota

This certificate has been issued on: 08/10/2020



*Steve Simon*

Steve Simon  
Secretary of State  
State of Minnesota

2020 Form 14 PR 6:27