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## **COVER LETTER**

**Registration Section** 

TO:

JBJECT:		
	e of Limited Liability Company	-
e enclosed "Application by Foreign Limited Liability istence, and check are submitted to register the above	Company for Authorization to Transact Business in Florida, referenced foreign limited liability company to transact business.	" Certificatiness in Flo
ase return all correspondence concerning this matter t	to the following:	
Gregg H. Rudolph		
	Name of Person	-
- Rudolph Group LLC		
	Firm/Company	-
4777 137th Street West		
	Address	-
Apple Valley, MN 55124		
C gregg.rudolph@rudolphgroup.net	City/State and Zip Code	2020 /
E-mail address: (to be	e used for future annual report notification)	
further information concerning this matter, please cal	•	4
Gregg Rudolph	952 423-2285	P:- 6
Name of Contact Person	at ()  Area Code Daytime Telephone Number	6: 37
Mailing Address:	Street Address:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 The Centre of Tallahassee		
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Talfahassee, FL 32303	
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEP	A DTMENT OF COATE	
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee Certificate o	e & 🔲 \$155.00 Filing Fee & 🔲 \$160.00 Filing Fee.	

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTEN THE POLITOWING INSURMITTED TO REGISTER A POREIGN TIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 87 OAK VILLAGE BOULEVARD LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L. E.C.," or "LLC.") State of Minnesota (Jurisdiction under the law of which foreign limited liability company is organized) January 1, 2020 (Date first transacted business in Florida, if prior to registration.) (See sections 605 0804 & 605 0905, F.S. to determine penalty liability) 4777 137th Street West 5. (Street Address of Principal Office) Apple Valley, MN 55124 USA 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) H. Herbert Rudolph Name: 2023 Sawgrass Trail Office Address: Sebring 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.

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:

Title or Capacity:

Name and Address:

Title or Capacity:	Name and Address:	Title or Capacity:	
■Manager	Gregg H. Rudolph Name;  477 1374 States West, Apple Valley, ARV 55121	□Manager	Cinda H. Rudolph Name:  1777 1376 Name West, Apple Valley, NR 55124
□Member	Address:	<b>≅</b> Member	Address:
□Authorized		□Authorized	
Person		Person	
Other	□Other	□Other	Other
□Manager	Rebecca G, Wambheim Name:	□Manager	Bradley G. Rudolph Name: 6711 Shordan Avenue South No. htipse NO. 55121
□Member	Address:	□Member	Address:
■Authorized		<b>■</b> Authorized	
Person		Person	
□Other	Other	□Other	□Other □
□Manager	Rachel A. Rudolph Name:	□Manager	Name:
□Member	Address:	□Member	Address:
■Authorized		□Authorized	<u> </u>
Person		Person	
□Other	Other	□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

Gregg H. Rudolph

Typed or printed name of signer

## 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



Here Pimm Steve Simon

Sieve Sillion

Secretary of State State of Minnesota