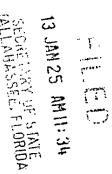
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(Re	equestor's Name)			
(Ac	ldress)			
(Ac	ldress)			
(Ci	ty/State/Zip/Phone	· #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				



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Office Use Only

mD 1/28

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Rainey Road Holdsngs, Inc. Name of corporation - must include suffix
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Kris Holthaus
Name of Person
Rainey Road Holdings, Inc.
Firm/Company
15600 37th Are N Ste 100
Addiess
Plymonth, MN 55446 City/State and Zip code
City/State and Zip code
Krish & Crowntonka. Com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kris Holthaus at (763) 543-2391 Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section MAILING ADDRESS: New Filing Section
Division of Corporations Division of Corporations
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314
Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status Certified Copy \$87.50 Filing Fee, Certified Copy

APPLICATI	ON BY FOREIGN CORPORATION	N FOR AUTHORIZATION TO TR	ANŞACT
	BUSINESS IN		<u> </u>
IN COMPLIANCE W REGISTER A FOREI	ITH SECTION 607.1503, FLORIDA STAT GN CORPORATION TO TRANSACT BUS	UTES, THE FOLLOWING IS SUBMITT INESS IN THE STATE OF FLORIDA.	ED TO AN 25
1. Rainey	Road Holdings	Tine	~~ ·
(Enter name of corp, "Inc.," "Co.," "Corp,	oration; must include "INCORPORATED," "C " "Inc," "Co," or "Corp.")	OMPANY," "CORPORATION,"	AM II: 34 FLORIDA
(If name unavailable	in Florida, enter alternate corporate name adop	ted for the purpose of transacting business in	Florida)
2. Minnes	ota USA 3.	20-3688273	* 15 *
(State or country unde	er the law of which it is incorporated)	(FEI number, if applicable)	
·· · · · · · · · · · · · · · · · · · ·	-2005 55	perpetual	**************************************
(Date of i	ncorporation) (Di	iration; Year corp. will cease to exist or "per	petual")
6. 01-	01-2013		
	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502, 1	rida, if prior to registration) P.S., to determine penalty liability)	
7. 15 600 37	18 A. N Sh 100	Plumouth MN 5	5446
/. / S & V =	(Principal office address)		<u> </u>
15600 37	to Ave N Ste 100	Plumouth MN 554	146
3	(Current malling address)		r el-un Mannon
8. <u>See// MA</u>	on u facture, \$ distr	the walk-in cool.	ers ofreezers
, , , , ,			
	iress of Florida registered agent: (P.O. Bo	x NOT acceptable)	
Name:	CT Corporation System		
Office Address:	1200 South Pine Island	•	
	Plantation	, Florida <u>33324</u>	
	(City)	(Zip code)	
0. Registered agent's	s acceptance:		

Having been named as registered agent and to accept service of process for the above stated corporation 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.

> Michele Miller **Assistant Secretary**

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS	
Chairman: Herb Kahler	<u> </u>
Address: 15400 37th Ane N. Ste 100	通
Plymonth, MN 55446	555 S
Vice Chairman:	
Address:	1:34 ORIDA
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Christopher Kahler	
Address: 15600 37th Are N Str 100	
Plymouth mr 55446	
Vice President: Michael Kahler	
Address: 15600 37th Ane N, Ste 100	
Phymouth, MN 55446	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and	/or directors.
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the are true and that he or she is aware that false information submitted in a document to the Departmer a third degree felony as provided for in s.817.155, F.S.	e facts stated herein
14. Michael Kahler VP Rainey Road F. (Typed or printed name and capacity of person signing application)	toldings, Inc

13 JAN 25 AM II: 34

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Mark Ritchie, 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:

Rainey Road Holdings, Inc.

Date Filed:

10/26/2005

File Number:

1559338-2

Minnesota Statutes, Chapter:

302A

Home Jurisdiction:

Minnesota

This certificate has been issued on:

11/20/2012



Mark Ritchie
Mark Ritchie

Secretary of State State of Minnesota