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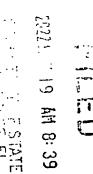
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COVER LETTER

	TO: Registration Section Division of Corporations					
SUBJE	·CT·	Bradenton Ranch Lake Burger	rs, Inc.			
0000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name o	l'corporation	- must include suffix		
Dear Si	r or M	adam:				
"Certifi	cate of	"Application by Foreign Corf Existence," or "Certificate of the Coreign corporation to transfer to the Corporation to the Corpo	of Good Star	iding" and check are submitt		
Please r	eturn :	all correspondence concernir	ng this matter	to the following:		
Richard	A. Lat	ta, Esq.				
			Name of	Person		
Stafford	Rosen	baum LLP				
			Firm/Con	npany		
222 Wes	st Wasl	nington Avenue, Suite 900				
			Addr	258		
Madisor	n, WL f	53703				
			City/State a	nd Zip code		
tammy@)bleed					
		E-mail address:	(to be used	or future annual report notif	ication)	
For furt	her inf	ormation concerning this ma	itter, please c	all:		
Richard A. Latta		608 at (259-2648			
	Name	e of Person	Area Cod	e Daytime Telephone	: Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		i:	Registration Section Division of Corpo P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	iake ch	check for the following amore ck payable to: FLORIDA DE ng Fee	PARTMENT Fee & - 1		\$87.50 Filing Fee, Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Enter name of c	h Lake Burgers, Inc. orporation; must include "INCORPORA" orp," "Inc," "Co," or "Corp.")	ГЕD," "С	OMPANY," "CORPORATION	N ,	
(If name unavails	able in Florida, enter alternate corporate i	name adop	ted for the purpose of transacting	business in Florida)	
2 Wisconsin		3			
(State or countr	(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
4. May 6, 2022		5.			
(Date	of incorporation)		(Date of duration, if other th	han perpetual)	
5.					
7	(SEE SECTIONS 607.1501 & c	507.1502,	rida, if prior to registration) F.S., to determine penalty liabilit	y)	
Portage, WI 539	•	al office <u>st</u>	reet address)		
7 Ortage, 441 339		nailing ad	dress, if different)	5	
3. Name and stree	et address of Florida registered agent:	(P.O. Bo	ox NOT acceptable)		
Name:	CT Corporation		_	EM 8: 39	
Office Address:	1200 South Pine Island Road, #250		_	, H	
	Plantation		, Florida 33324		
			_ ,		

9. Registered agent'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.

Stephanie Ticeo

Stephanie Picco (Registered agent's signature) Assistant Secretary

10. 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.

A. DIRECTORS Name: Chad A. Stevenson □ Chairman □ Chairman N1756 County Road T N8325 Dumke Road Address: Address: □ Vice Chairman □Vice Chairman Endeavor, WI 53903 Portage, WI 53901 □ Director □Director ■President □ President ■ Vice President □Treasurer □ Secretary ∃Treasurer ☐ Secretary □Other _____ □Other_____ □Other _____ □Other _____ Name: _____ □ Chairman Name: □Chairman □Vice Chairman Address: ☐ Vice Chairman Address: Director □ Director □President □President □Vice President □Vice President □Treasurer □ Secretary □ Secretary □Treasurer □Other _____ □Other _____ □Other _____ □Other _____ □ Chairman □ Chairman Name: Name: □Vice Chairman Address: □Vice Chairman Address: □Director □Director □President □President □Vice President _____ ☐ Vice President □ Secretary ☐Treasurer □ Secretary □Treasurer □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 Joyle Florida Department of State Annual Report form. Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

Chad A. Stevenson, President

United States of America State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS



Division of Corporate & Consumer Services

To All to Whom These Presents Shall Come, Greeting:

I, Michelle Y. Knuese, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

BRADENTON RANCH LAKE BURGERS, INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is May 06, 2022.

I further certify that said corporation or limited liability company has not yet completed its initial report year and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921, 181.0214 or 183.0120 Wis. Stats., and that said corporation or limited liability company has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on May 18, 2022.

MICHELLE Y. KNUESE, Administrator Division of Corporate and Consumer Services Department of Financial Institutions

DFI/Corp/33

To validate the authenticity of this certificate

Visit this wish address; http://www.widf.org/opps/ops/vorify