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S. ROBERTS
DEC 14 2022

COVER LETTER

	gistration Section ision of Corporations				
SUBJECT	. Lehigh Acres Burgers, Inc.				
		Name of corporation - must include suffix			
Dear Sir or	Madam:				
"Certificate	d "Application by Foreign Co of Existence," or "Certificate enced foreign corporation to tr	of Good Stan	Authorization to Transact Business in Flo ding" and check are submitted to register ss in Florida.	orida." the	
Please return	n all correspondence concerni	ng this matter	to the following:		
Richard A. I.	Latta, Esq.				
•		Name of	Person		
Stafford Ros	enbaum LLP				
		Firm/Com	pany		
222 West Wa	ashington Avenue, Suite 900				
		Addro	ess — — — — — — — — — — — — — — — — — —		
Madison, Wl	1 53703				
	·	City/State ar	nd Zip code		
tammy@blee	edblue.net				
	E-mail address	: (to be used f	or future annual report notification)		
For fu r ther i	nformation concerning this m	atter, please c	all:		
Richard A. L.	atta	at (259-2648		
Nai	me of Person	Area Code	Daytime Telephone Number	_	
Reg Divi The 241:	REET/COURIER ADDRESS istration Section ision of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810 ahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	a check for the following amo check payable to: FLORIDA DF iling Fee	EPARTMENT g Fee & = =	OF STATE \$78.75 Filing Fee & Certified Copy Certified C	of Status &	

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.

(If name unavail	able in Florida, enter alternate corporate nar	ne adopted for the purpose of transacting busin	ess in Florida)	
Wisconsin		3 88-4185562		
		3. (FEI number, if applicable	2)	
September 27,	2022	5		
(Date of incorporation) 5.		(Date of duration, if other than per	rpetual)	
		s in Florida, if prior to registration) 2.1502, F.S., to determine penalty liability)		
2651 Kirking Co	un Portuge WI 53901			
	(Principal o	office street address)		
	(Current ma	iling address, if different)		
Name and stre	et address of Florida registered agent: (I	P.O. Box NOT acceptable)	20 22 DEC	
Name:	eT Corporation System			
fice Address:	1200 South Pine Island Road			
	Plantation	, Florida 33324 (Zip code)	T0	
	(City)	(Zip code)	ယ္	
			50	
Dogistored ag	antia accontances			
	ent's acceptance: ned as registered agent and to accept se.	rvice of process for the above stated corpo	ration at the pi	

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	Jeffrey J. Liegel			
_	N1756 County Road T		NS325 Dumke Road			
	Endeavor, WI 53903	□Vice Chairman	Address: Portage, WI 53901			
□Director		□Director				
President		□President				
□Vice President		■Vice President				
□Secretary	□Treasurer	☐ Secretary	□Treasurer			
□Other	□Other	□Other	Other			
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□Vice President		□Vice President				
□ Secretary	□Treasurer	☐ Secretary	☐Treasurer			
□Other	Other	□Other	Other			
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President		□President				
□Vice President		□Vice President				
□ Secretary	□Treasurer	□Secretary	□Treasurer			
□Other	Other	□Other	Other			
Important Notice: Undividuals may be	Jse an attachment to report more than six (6). The atta added to the index when thing your Florida Department	schment will be image ent of State Annual Re	d for reporting purposes only. Non-indexed port form.			
12.	Signature of Director of	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 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 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						

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.

13. 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, Jennifer Dohm, Deputy Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

LEHIGH ACRES 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 September 27, 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 December 02, 2022.

JENNIFER DOHM, Deputy Administrator Division of Corporate and Consumer Services Department of Financial Institutions

Jennifu Dohn

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code: 348968-14B513F7