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S. FRANKLIN
DEC 15 2022

## **COVER LETTER**

TO:		tration Section ion of Corporations					
SUBJE	ECT:	Brooksville Burgers, Inc.					
		Name of corporation - must include suffix					
Dear Si	ir or M	adam:					
"Certifi	icate of	"Application by Foreign Corp Existence," or "Certificate of ced foreign corporation to tran	Good Stan	ding":	and check are submi		
Please 1	return a	all correspondence concerning	this matter	to the	following:		
Richard	l A. Lat	ta, Esq.					
			Name of I	Person			
Stafford	i Rosen	baum LLP					
			Firm/Com	pany			
222 We	st Wasi	nington Avenue, Suite 900					
		<del></del>	Addre	288	-	<u> </u>	.,,
Madisor	n, WI :	53703					2:
_	<del></del>	(	City/State ar	nd Zip	code		1
tammy(	@bleed	blue.net					Ċn
		E-mail address: (	to be used f	or futu	ire annual report noti	ification)	<del>-</del> ना
For furt	ther inf	ormation concerning this matt	ter, please c	all:			زن
							9
Richard A. Latta		. ()		259-2648			
	Name	e of Person	Area Code	e	Daytime Telephor	ne Number	•
	Regis Divisi The C 2415	CET/COURIER ADDRESS: tration Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 nassee, FL 32303			MAILING ADI Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	tion orations	
	nake ch	check for the following amour eck payable to: FLORIDA DEP. ng Fee	ARTMENT Fee & ■	ī \$78.1		S87.50 Filin Certificate of Certified Co	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.

name unavai	able in Florida, enter alternate corporate name ac	lopted for the purpose of transacting bu	siness in Florida)	
Wisconsin				
(State or country under the law of which it is incorporated)		92-0626184 (FEI number, if applicable)		
September 27, 1	2022			
(Date of incorporation) 5.		(Date of duration, if other than perpetual)		
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150	Florida, if prior to registration)	-	
651 Kirking Co		z, i .s., to determine penalty hability)		
		: street address)	<del></del> -	
ortage, WI 539	·	street address;		
-	(Current mailing	address, if different)	<del></del>	
		,		
Name and <u>stre</u>	et address of Florida registered agent: (P.O.	Box NOT acceptable)	دې	
	et address of Florida registered agent: (P.O.  CT Corporation 545+em	Box NOT acceptable)	2.1.1	
Name:	CT Corporation System	Box <u>NOT</u> acceptable)	2	
Name:	CT Corporation Sustem  1200 South Pine Island Road		2	
Name:	CT Corporation Sustem  1200 South Pine Island Road			
	CT Corporation Sustem  1200 South Pine Island Road	Box NOT acceptable) , Florida 33324(Zip code)	cn Th	
Name: fice Address:	1200 South Pine Island Road  Plantation  (City)			
Name: ice Address: Registered ag	CT Corporation Sustem  1200 South Pinc Island Road  Plantation  (City)  ent's acceptance:	, Florida 33324 (Zip code)	E PH 2:10	
Name: fice Address: Registered agving been nan ignated in this	CT Corporation SUSTEM  1200 South Pinc Island Road  Plantation  (City)  ent's acceptance: and as registered agent and to accept services application, I hereby accept the appointment	, Florida 33324, Florida (Zip code)  tof process for the above stated corn nt as registered agent and agree to	poration at the act in this capa	
Name: Tice Address: Registered agving been nanignated in this	CT Corporation SUSTEM  1200 South Pine Island Road  Plantation  (City)  ent's acceptance:  seed as registered agent and to accept service	, Florida 33324, Florida (Zip code)  Tof process for the above stated corn that as registered agent and agree to ative to the proper and complete pe	poration at the act in this capa	

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	Chad A. Stevenson		leffrey	l Licorl				
□Chairman	Name:	□Chairman □Vice Chairman □Director	Name: N8325 Dumke Road Address:					
□Vice Chairman	Address: N1756 County Road T							
□Director	Endeavor, WI 53903		Portage, WI	53901				
President		□President						
□Vice President		■Vice President						
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer				
□()ther	Other	□Other		□Other				
□Chairman	Name:	□Chairman	Name:					
□Vice Chairman	Address:	□Vice Chairman	Address:					
□Director	-	□Director						
□President		□President						
□Vice President		□Vice President	<del> </del>					
☐ Secretary	□Treasurer	□Secretary		□Treasurer				
□Other	Other	□Other		□Other				
				2.				
□ Chairman	Name:	□Chairman	Name:	<u> </u>				
□Vice Chairman	Address:	□Vice Chairman	Address:	1				
□Director		□Director		-ò				
□President		□President		~				
□Vice President		□Vice President		- <del>ن</del>				
☐ Secretary	□Treasurer	□Secretary		□Treasurer				
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.  12. 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, Jennifer Dohm. Deputy Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

### BROOKSVILLE 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

Jennifer 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: 348961-128C1279