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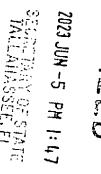
(Requestor's Name)
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(Business Entity Name)
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COVER LETTER

	tration Section ion of Corporations			
SUBJECT:	Leyendecker Group, Inc.			
SOBILC1.	Name o	of corporation - n	nust include suffix	<u> </u>
Dear Sir or M	adam:			
"Certificate of	"Application by Foreign Co f Existence," or "Certificate ced foreign corporation to tr	of Good Standin	g" and check are submi	
Please return a	all correspondence concerni	ng this matter to	the following:	
Nicholas Leyer	ndecker			
		Name of Per	son	· - ·
Leyendecker G	Froup, Inc.			
		Firm/Compar	iy	
1014 Yuma La	ine N			
		Address		_
Plymouth, MN	55447			
		City/State and	Zip code	
admin@nickle	yendecker.com			
	E-mail address	(to be used for	uture annual report not	ification)
For further inf	formation concerning this ma	atter, please call:		
Nick Leyendec	ker	at ()	413-1777	
Name	e of Person	Area Code	Daytime Telephor	ne Number
Regis Divisi The C 2415	EET/COURIER ADDRESS tration Section ion of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 nassee, FL 32303	S:	MAILING ADI Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion orations
	check for the following amo eck payable to: FLORIDA DF ng Fee	PARTMENT OF \S Fee & \square \$		☐ \$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.

"Inc.," "Co.," "C	orp." "Inc." "Co," or "Corp.")			
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in F	lorida)	
Minnesota	3			
(State or counti	y under the law of which it is incorporated)	(FEI number, if applicable)		
08/07/2012	5			
(Date	of incorporation)	(Date of duration, if other than perpetual)		
N/A				
		in Florida, if prior to registration) [502, F.S., to determine penalty liability)		
1990 Main Street	, Suite 750 Sarasota, FL 34236	200. Clotto avecimine penalty interrity)		
		fice street address)		
1014 Yuma Lan	N. Plymouth, MN 55447	<u></u>		
	(Current maili	ng address, if different)		
	(Current mail	ng address, if different)		
Name and stre	(Current mails			
Name:	et address of Florida registered agent: (P.			
Name:	et address of Florida registered agent: (P. Nicholas Leyendecker 1990 Main Street, Suite 750	O. Box NOT acceptable)	2023	
Name:	et address of Florida registered agent: (P. Nicholas Leyendecker 1990 Main Street, Suite 750 Sarasota	O. Box NOT acceptable) Compared to the second seco	2023 JU	
Name:	et address of Florida registered agent: (P. Nicholas Leyendecker 1990 Main Street, Suite 750	O. Box NOT acceptable) Continue of the second seco	- NOT 5202	
Name: ffice Address: Registered ag	Pet address of Florida registered agent: (P. Nicholas Leyendecker 1990 Main Street, Suite 750 Sarasota (City) ent's acceptance:	O. Box NOT acceptable) . Florida 34236	2023 JUN -5	
Name: ffice Address: Registered agaving been nan	Pet address of Florida registered agent: (P. Nicholas Leyendecker 1990 Main Street, Suite 750 Sarasota (City) ent's acceptance: and as registered agent and to accept serv	O. Box NOT acceptable) . Florida 34236	mothe ,	
Name: ffice Address: Registered ag aving been nan esignated in this orther agree to c	et address of Florida registered agent: (P. Nicholas Leyendecker 1990 Main Street, Suite 750 Sarasota (City) ent's acceptance: wed as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes	O. Box NOT acceptable) . Florida 34236	u o the is Capa	
Name: ffice Address: Registered ag laving been nan esignated in this arther agree to c	Pt address of Florida registered agent: (P. Nicholas Leyendecker 1990 Main Street, Suite 750 Sarasota (City) ent's acceptance: and as registered agent and to accept serv application, I hereby accept the appoint	O. Box NOT acceptable) . Florida 34236	u o the is Capa	
Name: ffice Address: Registered ag aving been nan esignated in this orther agree to c	et address of Florida registered agent: (P. Nicholas Leyendecker 1990 Main Street, Suite 750 Sarasota (City) ent's acceptance: sed as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes with and accept the obligations of my possible servers.	O. Box NOT acceptable) . Florida 34236	u o the is Capa	
Name: ffice Address: Registered ag aving been nan esignated in this orther agree to c	et address of Florida registered agent: (P. Nicholas Leyendecker 1990 Main Street, Suite 750 Sarasota (City) ent's acceptance: wed as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes	O. Box NOT acceptable) . Florida 34236	u n the is 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.

□ Chalmaan	Name: Nicholas Leyendecker	□Chairman	Sage I	.eyendecker
□Chairman	1000 Main Street, Suite 750		Address:	
□Vice Chairman _	Address:Sarasota, FL 34236			
Director		_ Director		
■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		
☐Secretary	□Treasurer	□ Secretary		□Treasurer
⊡Other	Other	□Other		□Other
⊒Chairman	Name:	_ □Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
∃Director		□Director		
□President		□President	4	
∃Vice President		□ Vice President		
□Secretary	□Treasurer	□ Secretary		Treasurer
□Other	□Other	Other		□Other
individuals may b	Use an attachment to report more than six (6), a added to the index when filing your Florida I	Department of State Annual R	eport form.	
12	Virdus Beyon Signature of I	Tiesius (Oliver	1 / U//2	

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: Leyendecker Group, Inc.

Date Filed: 08/09/2012

File Number: 612523800024

Minnesota Statutes, Chapter: 302A

Home Jurisdiction: Minnesota

This certificate has been issued on: 05/31/2023

Oteve Vimm

Steve Simon

Secretary of State State of Minnesota