## F230000004148

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(a.i), and a clip ii)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
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2023 JUL -5 PM 2: 35

## **COVER LETTER**

TO: Registration Secti Division of Corpo					
SUBJECT: LaSalle Dev	elopment Group, Ltd. Corp.				
SUBJECT:	Name of corpora	tion - must i	nclude suffix		
Dear Sir or Madam:					
"Certificate of Existence,"	n by <u>Foreign Corporation</u> or "Certificate of Good Scorporation to transact bus	Standing" ar	id check are subm	Business in Florida," itted to register the	
Please return all correspon	ndence concerning this ma	atter to the fo	ollowing:		
Brent LaSalle					
	Name	of Person			
LaSalle Legal Services, PLI	LC .				
<del></del>	Firm/0	Company	·		
2001 Killebrew Drive, Suite	: 100				
	A	ddress			
Bloomington, MN 55425					
	City/Sta	ite and Zip c	ode		
ANNE@LaSallegrp.com					
	E-mail address: (to be us	sed for futur	e annual report no	tification)	
For further information co	oncerning this matter, plea	ase call:			
Brent LaSalle	651	442-	12-3462  Daytime Telephone Number		
Name of Person	Area	Code	Daytime Telepho	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	te following amount: to: FLORIDA DEPARTM  \$78.75 Filing Fee & Certificate of Status	□ \$78.7:	ATE 5 Filing Fee & ĭed Copy	\$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.

1.	pment Group, Ltd. Corp.				
	corporation; must include "INCORPORATED corp," "Inc," "Co," or "Corp.")	," "COMPANY," "CORPORATION,"			
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transacting business in F	lorida)		
Minnesota 2.	74	41-1744344			
(State or countr	ry.under the.law of-which it is incorporated)	(FELnumber, if applicable)			
4. 11/24/1992	5				
(Date	e of incorporation) 5	(Date of duration, if other than perpetual)			
6.		<u></u>			
		in Florida, if prior to registration) 502, F.S., to determine penalty liability)			
_ 2001 Killebrew I	Drive, Suite 100 Bloomington, MN 55425	, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
7. <u></u>		fice street address)			
	, ,				
_	(Current maili	ng address, if different)			
8. Name and stre	et address of Florida registered agent: (P.	O. Box <u>NOT</u> acceptable)	20:		
Name:	Paracorp Incorporated	· 5)	(전) (조) (조)		
	155 Office Plaza Drive	<del></del>	<u>.</u> = .		
Office Address:					
		, Florida 32301	] <u>p</u>		
	(City)	(Zip code)			
9. Registered ag	ent's acceptance:		ြို့ မှ		
Having been nan	ned as registered agent and to accept serv	vice of process for the above stated corporation	i at the place		
designated in this further agree to d	s application, I hereby accept the appoint comply with the provisions of all statutes	ment as registered agent and agree to act in the relative to the proper and complete performan	us cupacity. s ice of my duties		
and I am familia	r with and accept the obligations of my p	osition as registered agent.	• •		
	ON.				
	(Registered agent's	signature)			
			a amplication to		
<ol> <li>Attached is a</li> </ol>	certificate of existence duly authenticated	l, not more than 90 days prior to delivery of this	apprication to		

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

<sup>11.</sup> For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS							
□ Chairman	Thomas LaSalle	□ Chairman	Name:				
□ Vice Chairman	Address: 2001 Killebrew Drive, Suite 100	□Vice Chairman	Address:				
□Director	Bloomington, MN 55425	□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	<del></del>				
□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	<del></del>	Other			
individuals may b	Lise an attachment to report more than six (b). The attended to the index when filing your Florida Department	nent of State Annual F	Ceport Iorm.				
12. Signature of Director or Officer							
The officer or direshe is aware that s.817.155, F.S.	ector signing this document (and who is listed in numb false information submitted in a document to the Depa	per 11 above) affirms interest of State consti	that the facts stat tutes a third degr	ed herein are true and that he or ee felony as provided for in			

13. Thomas LaSalle

(Typed or printed name and capacity of person signing application)

## 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: LaSalle Development Group, Ltd.

Date Filed: 11/24/1992

File Number: 7P-690

Minnesota Statutes, Chapter: 302A

Home Jurisdiction: Minnesota

This certificate has been issued on: 06/27/2023

Oteve Vimm

Steve Simon

Secretary of State State of Minnesota