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(Requestor's Name)

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(City/State/Zip/Phone #)

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03 MAY -7 AM 8:57

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

# MLG

Brookfield, WI  
Madison, WI  
Appleton, WI  
Tampa, FL

13400 Bishop's Lane  
Suite 100  
Brookfield, Wisconsin 53005  
**262-797-9400**  
Fax: 262-797-8940  
[www.mlgcommercial.com](http://www.mlgcommercial.com)

May 5, 2003

VIA EXPRESS MAIL

Florida Department of State  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

RE: MLG/Island Passage LLC

Dear Sir or Madam:

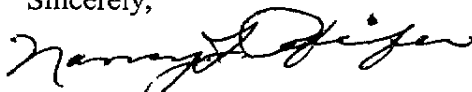
Enclosed are the following documents relating to the above entity:

1. One original and one exact copy of the Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida;
2. Certificate of Designation of Registered Agent/Registered Office; and
3. Certificate of Existence.

Please apply the enclosed check in the amount of \$125.00 as payment of the filing fee and return a letter of acknowledgement to my attention.

If you should have any questions please do not hesitate to contact me.

Sincerely,



Nancy J. Pfeifer  
Paralegal

Encs.

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN  
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. MLG/Island Passage LLC  
(Name of foreign limited liability company)

2. Wisconsin 3. 41-2091214  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. APRIL 17, 2003 5. 12/31/2025  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. APRIL 17, 2003  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))

7. 13400 Bishops Lane, Suite 100  
Brookfield, WI 53005  
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

MLG Investments 2000 LLC

13400 Bishops Lane, Suite 100

Brookfield, WI 53005

Attention: Andrew C. Teske

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Real Estate

By: Andrew C. Teske, VP

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Andrew C. Teske, Vice President

Typed or printed name of signee

FILED  
03 MAY -7 AM 8:57  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE  
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

MLG/Island Passage LLC

2. The name and the Florida street address of the registered agent and office are:

Susan Fleming Bennett, c/o Stearns Weaver Miller et al

(Name)

401 E. Jackson Street, Suite 2200

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tampa

FL

33602

(City/State/Zip)

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.*



(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

DOM  
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United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Present Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions do hereby certify that

MLG/ISLAND PASSAGE LLC

is a domestic limited liability company organized under the laws of this state and that its date of organization is APRIL 17, 2003.

I further certify that said company has not filed articles of dissolution with this department.



IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed the official seal  
of the Department on April 28, 2003.

A handwritten signature in black ink, appearing to read "Ray Allen".

RAY ALLEN, Deputy Administrator  
Division of Corporate & Consumer Services  
Department of Financial Institutions

BY: A handwritten signature in black ink, appearing to read "Patricia Weber".