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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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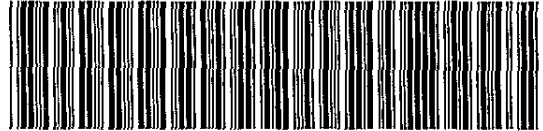
MAKI TAX & ACCOUNTING, INC.
26061 Main St PO Box 124
Zimmerman, MN 55398-0124
BUSINESS# 763-856-0897
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TALLAHASSEE, FLORIDA

W03-37678
J. BRYAN DEC 12 2003

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FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

December 12, 2003

MAKI TAX & ACCOUNTING, INC.
PO BOX 124
ZIMMERMAN, MN 55398-0124

SUBJECT: THE LAND OF SONSHINE PROPERTIES, LLC
Ref. Number: W03000037678

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TALLAHASSEE, FLORIDA

We have received your document for THE LAND OF SONSHINE PROPERTIES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

Please list the complete principal's office address. This address must be a street address; a post office box is not acceptable.

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 803A00066801

**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. The Land of Sunshine Properties, LLC
(Name of foreign limited liability company)
2. Minnesota
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 33-1049763
(FEI number, if applicable)
4. 3-7-03
(Date of Organization)
5. perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. 3-7-03
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.135, F.S.))
7. 50564 Shorewood Circle
Rush City, Mn 55069
(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:

MGRM = Anne Crawford, 50564 Shorewood Circle, Rush City Mn 55069
MGRM = Danna M. Burch, 50564 Shorewood Circle, Rush City, Mn 55069
MGRM = Robert Burch, 50564 Shorewood Circle, Rush City, Mn 55069

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.) - see attached

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

Rental Property

Bob L. Maki

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.)

Robert L. Maki

Typed or printed name of signer

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**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:

The Land of Sunshine Properties, LLC

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

LeAnna Miller
(Name)

5499 Rattle Snake Hammock
Florida street address (P.O. Box ~~NOT~~ ACCEPTABLE)

Maples FL 34113
(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)

State of Minnesota

SECRETARY OF STATE

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OFFICE OF CORPORATIONS
TALLAHASSEE, FLORIDA

Certificate of Organization

I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: Articles of Organization, duly signed, have been filed on this date in the Office of the Secretary of State, for the organization of the following limited liability company, under and in accordance with the provisions of the chapter of Minnesota Statutes listed below.

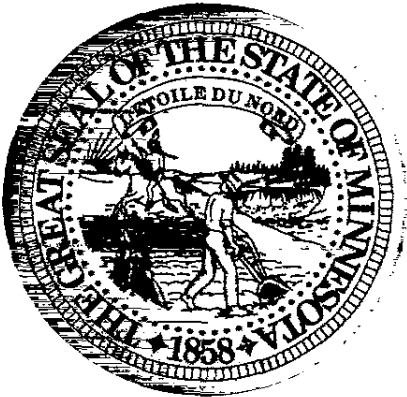
This limited liability company is now legally organized under the laws of Minnesota.

Name: THE LAND OF SONSHINE PROPERTIES, LLC

Charter Number: 39257-LLC

Chapter Formed Under: 322B

This certificate has been issued on 03/07/2003.



Mary Kiffmeyer
Secretary of State.