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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

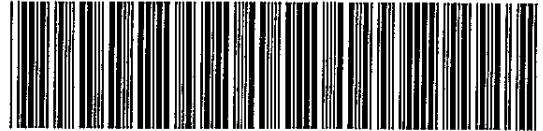
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

8/25 FOR LC

Office Use Only

W04-25678



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STATE OF FLORIDA
TALLAHASSEE

HAASE CONSTRUCTION COMPANY

Founded 1956

Roy T. Haase

Professional Engineer

718 95th Avenue N., Naples, Florida 34108

(239) 514-4066
Mobile (239) 777-4613
Fax (239) 514-2750

FLORIDA LICENSE CGC060539
WISCONSIN LICENSE 249109
CALIFORNIA LICENSE 475492



June 28, 2004

Florida Department of State
Division of Corporations
Registration Section
P. O. Box 6327
Tallahassee, Fl. 32314

Enclosed herewith are the following:

Application By Foreign Limited Liability Company For Authorization
To Transact Business In Florida

with the \$100.00 filing fee

Certificate Of Designation Of Registered Agent/Registered Office

with the \$25.00 filing fee

Articles of Organization of Happy Wanderer LLC

Very truly yours,

HAASE CONSTRUCTION COMPANY


Roy T. Haase

RTH:akh
Encls.



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

July 6, 2004

ROY T. HAASE
HAASE CONSTRUCTION COMPANY
718 95TH AVENUE N.
NAPLES, FL 34108

SUBJECT: HAPPY WANDERER LLC
Ref. Number: W04000025678

We have received your document for HAPPY WANDERER LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return 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) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 504A00043329

**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. Happy Wanderer LLC
(Name of foreign limited liability company)
2. Wisconsin USA
(Jurisdiction under the law of which foreign limited liability company is organized)
3. Entity ID No. XXXXXX H034478
(FEI number, if applicable)
4. October 11, 2001
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. June 28, 2004
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 718 - 95th Ave. N.
Naples, FL. 34108
(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:

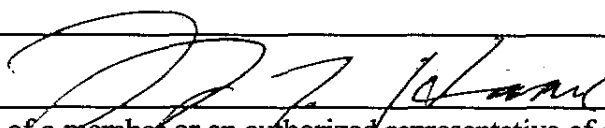
<u>Roy T. Haase</u>	<u>718 - 95th Ave. N.</u>	<u>Naples, FL. 34108</u>
<u>Audrey K. Haase</u>	<u>" " "</u>	<u>" " "</u>

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TALLAHASSEE FLORIDA

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: _____

Developing Housing


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.)

Roy T. Haase

Typed or printed name of signee

**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:

Happy Wanderer LLC

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

Roy T. Haase

(Name)

718 - 95th Ave. N.

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

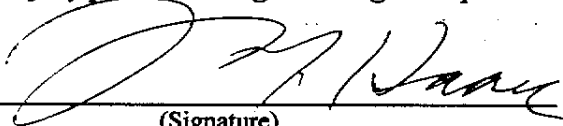
Naples

FL

34103

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)

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

DOM
183

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

HAPPY WANDERER LLC

is a domestic limited liability company organized under the laws of this state and that its date of organization is OCTOBER 11, 2001.

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 August 18, 2004.

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".