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15 October, 2004

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Transmittal Letter; Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida", "Certificate of Existence", and check to register

Dear Sir or Madam:

Please find enclosed Palmer Hamilton's transmittal letter, application, and certificate of existence for our registration to transact business in Florida.

Also enclosed is a check made payable to the Florida Department of State in the amount of \$160 to cover the Filing Fee, Certificate of Status and Certified Copy.

Thank you for your assistance and cooperation in this matter. Please do not hesitate to contact me should you have any questions or need additional information.

Sincerely,

Nancy L. Foster
Internal Sales & Marketing Specialist

Enclosures

04 OCT 18 PM 1:18

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PALMER HAMILTON LLC
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

TOD A. FRISKE
(Name of Person)

PALMER HAMILTON LLC
(Firm/Company)

143 S. JACKSON ST., SUITE 1
(Address)

ELKHORN WI 53121
(City/State and Zip Code)

For further information concerning this matter, please call:

TOD A. FRISKE
(Name of Person)

at (262) 723-8200 x.265
(Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

04 OCT 18 PM 1:18
U.S. DEPARTMENT OF COMMERCE
DIVISION OF CORPORATIONS

**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. PALMER HAMILTON LLC
(Name of Foreign Limited Liability Company)
2. WI
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 20-1701862
(FEI number, if applicable)
4. 5-7-2004
(Date of Organization)
5. PERPETUAL
(Duration: Year limited liability company will cease to exist or "perpetual")
6. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 143 S. JACKSON ST., SUITE 1
ELKHORN WI 53121
(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:

JOHN G. GARDNER

TOD A. FRISKE

JAMES M. DOUGHERTY

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: SALES OF
MOBILE FOLDING CAFETERIA TABLES

Tf
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.)

TOD A. FRISKE
Typed or printed name of signee

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

PALMER HAMILTON LLC

is a domestic limited liability company organized under the laws of this state and that its date of organization is MAY 7, 2004.

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 6, 2004.



State of Wisconsin _____)ss
County of WALWORTH

Signed and sworn to me on OCTOBER 14, 2004.

Handwritten signature of Ray Allen.

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

Handwritten signature of Donna Hensch.

Notary's Signature

Notary Public

My commission expires: April 20, 2008

BY: Patricia Weber

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

**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:

PALMER HAMILTON LLC

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

CT CORPORATION SYSTEMS

(Name)

1200 S. PINE ISLAND RD.

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

PLANTATION

FL

33324

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, Florida Statutes.

Tfh

(Signature)

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

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