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(Address)

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(City/State/Zip/Phone #)

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☐ WAIT

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer.

W05-5306

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03/04/05 11:11:43
TAXPAYER SERVICE CENTER
CANADA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 7, 2005

ROBERT E. WILSON
4905 34TH ST. SOUTH #332
ST. PETERSBURG, FL 33711

SUBJECT: LEEKSEEK NORTH AMERICA, LLC
Ref. Number: W05000005306

We have received your document for LEEKSEEK NORTH AMERICA, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the names and street addresses of the members or managers of the limited liability company.

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) 245-6890.

Jason Merrick
Document Specialist

Letter Number: 705A00015608

05 MAR 23 AM 11:23
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

February 2, 2005

ROBERT E. WILSON
4905 34TH ST. SOUTH #332
ST. PETERSBURG, FL 33711

SUBJECT: LEEKSEEK NORTH AMERICA, LLC
Ref. Number: W05000005306

We have received your document for LEEKSEEK NORTH AMERICA, LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6890.

Jason Merrick
Document Specialist

Letter Number: 805A00007196

2/22/05 \$ 55 check

05 MAR 28 AM 11:43
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LEEKSEEK NORTH AMERICA, 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:

ROBERT E WILSON
(Name of Person)

LEEKSEEK NORTH AMERICA, LLC
(Firm/Company)

4905 34TH ST SOUTH, #332
(Address)

ST. PETERSBURG, FL 33711
(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERT E WILSON at (727) 866-8118
(Name of Person) (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
+55
☐ \$130.00 Filing Fee &
Certificate of Status
☐ \$155.00 Filing Fee &
Certified Copy
☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

05 MAR 28 AM 11:23
TALLAHASSEE, FL 32314

**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. LEEKSECK NORTH AMERICA, LLC
(Name of Foreign Limited Liability Company)
2. WISCONSIN
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 41-2155013
(FEI number, if applicable)
4. JUNE 8, 2004
(Date of Organization)
5. PERPETUAL
(Duration: Year limited liability company will cease to exist or "perpetual")
6. N/A
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 4905 34TH ST. SOUTH, #332
ST. PETERSBURG, FL 33711
(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:

ROBERT E. WILSON, 1371ST STREET W, ST. PETERSBURG, FL 33715

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:

ENERGY CONSULTING SERVICES

Robert E. Wilson
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 E. WILSON

Typed or printed name of signee

FILED
TALLAHASSEE, FLORIDA
05 JUN 2004 11:23

**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:

LEEKSEK NORTH AMERICA, LLC

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

ROBERT E. WILSON

(Name)

137 1ST STREET WEST

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

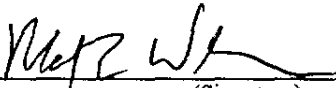
TIERRA VERDE

FL

33715

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.



(Signature)

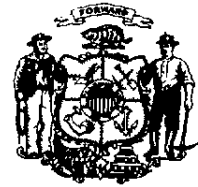
FILED
05/16/2011
11:43
TALLAHASSEE
FLORIDA

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

DOM NEW
180 181 185

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

LEEKSEEK NORTH AMERICA, LLC

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is JUNE 8, 2004.

I further certify that said corporation or limited liability company has not yet completed its initial report year and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats.; and that said corporation or limited liability company has not filed articles of dissolution.

IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed the official seal
of the Department on January 3, 2005.

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".

