

m05000004769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Name
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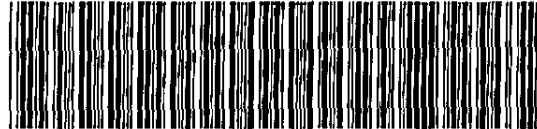
City

State

Zip

Phone

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08/26/05--01033--025 **160.00

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2005 AUG 26 P 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Lifetime Legal Services, S.C.

Steven D. Mayer
Attorney at Law, CPA

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Milwaukee, Wisconsin 53202

Office: (414) 224-9455

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August 25, 2005

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

Re: TC Partners, LLC

Dear Sir/ Madam:

I enclose an Application of Foreign Limited Liability Company along with a Certificate of Status from Wisconsin and a check for \$160.00.

Please acknowledge receipt of this letter by date stamping the enclosed copy and returning it to me in the enclosed envelope.

Please call me if you have any questions or concerns.

Sincerely Yours


Steven D. Mayer

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TALLAHASSEE, FLORIDA

Cc: Richard Almandi

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TC Partners, 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:

Steven D. Mayer, Esq
(Name of Person)

Lifetime Legal Services, SC
(Firm/Company)

312 East Wisconsin Ave, Ste 208
(Address)

Milwaukee, WI 53202
(City/State and Zip Code)

For further information concerning this matter, please call:

Steven D Mayer at (414) 224-9455
(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 ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FLORIDA

**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:

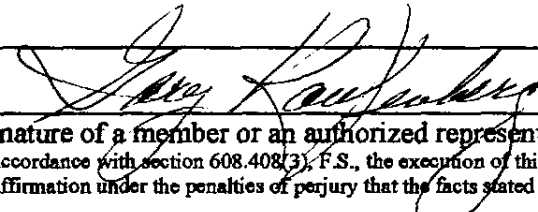
1. TC Partners, LLC
(Name of Foreign Limited Liability Company)
2. Wisconsin 3. 20-1174604
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)
4. 6/1/04 5. Perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. 9/1/2005
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. W 238 N 3350 Pine Hill Court
Pewaukee, WI 53072
(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:

Richard Almandi, W 238 N 3350 Pine Hill Court, Pewaukee, WI 53072

Gary Kaufenberg, 585 NE Ocean Blvd., Stuart, FL 34996

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 Investment


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.)

Gary Kaufenberg

Typed or printed name of signee

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TALLAHASSEE
SECRETARY OF STATE
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:

TC Partners, LLC

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

Gary Kaufenberg

(Name)

585 NE Ocean Blvd.,

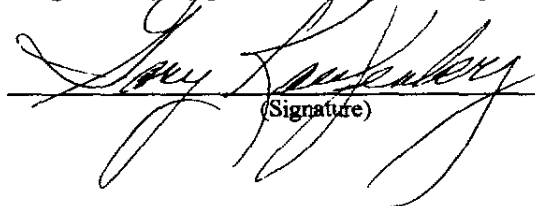
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Stuart

FL 34996

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)

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JUN 26 P 2:21
CLERK OF STATE
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)

United States of America

State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

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

TC PARTNERS, 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 May 27, 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 August 25, 2005.



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

A handwritten signature of Ray Allen in black ink.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005 AUG 26 P 2:21

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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.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: <http://www.wdfi.org/apps/ccs/verify/>

Enter this code: **16867-C7310E12**