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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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06 DEC 26 PH 2: 43
SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Cross Country Sales, LLC (Name of Lin	nited Liability Company)	_ * * *
The enclosed "Application by Foreign Limited Lia Florida," Certificate of Existence, and check are stability company to transact business in Florida Please return all correspondence concerning this reference.	ability Company for Authorization to Tra ubmitted to register the above referenced	
Dana Brunstrom		
(Na	ame of Person)	
Nohre & Co. S.C.	<u> </u>	SER OF
(Fi	rm/Company)	AH PE
4228 Southtowne Drive		C 26 PM
	(Address)	PH 2: 43 COF STATE
Eau Claire, WI 54701		RIDA RIDA
(City/S	tate and Zip Code)	
For further information concerning this matter, ple	ease call:	
Dana Brunstrom	at (_715) 833-6749	
(Name of Person)	(Area Code & Daytime Telephone	Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount: ☑ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate o		g Fee, Certificate tatus & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Cross Country Sales, LLC	* 4.** *:
(Name of Foreign Limited Liability Company)	
2. Wisconsin 3. 20-5902110	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	-
November 17, 2006 5 Perpetual	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	•
6. No business transacted in Florida prior to registration	
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 10988 Olson Drive	
Eau Claire, WI 54703 (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:	J
Dean Hansen RDF 5	` ~
10988 Olson Drive	-
Eau Claire, WI 54703	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recording functions 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: Wholesale Agent-Broker	•
of Food Products	· · · · · · · · · · · · · · · · · · ·
Signature of a member or an authorized representative of a member.	-1 <u>+</u>
(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.)	
Dean Hansen	
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:	
Cross Country Sales, LLC	_ <u></u> :
2. The name and the Florida street address of the registered agent and office are:	
Victor Siebert (Name)	O6 DEC
·	26 PI ASSFE
Plorida Street Address (P.O. Box NOT ACCEPTABLE)	PH 2: 4
Punta Gorda FI. 33590	ATE RIDA

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.

Edward V. Subert

\$ 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

CROSS COUNTRY SALES, LLC

is a domestic corporation or a domestic limited liability company organized under the laws of Aris state and its date of incorporation or organization is NOVEMBER 17, 2006.

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SECRETARY OF STATE
AND ASSEE FLORIDA

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 December 6, 2006.

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

BY: Valysia Weben

D.FI/CORP/38 RECORD 2/00

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

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 the annexed copy has been compared by me with the record on file in the Corporation Section of the Division of Corporate & Consumer Services of this department and that the same is a true copy thereof and the whole of such record; and that I am the legal custodian of said record, and that this certification is in due form.

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

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

DATE: **DEC - 6** 2006

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.

Back to Previous page

Sec. 183.0202 Wis. Stats.



State of Wisconsin Department of Financial Institutions

ARTICLES OF ORGANIZATION - LIMITED LIABILITY COMPANY

Executed by the undersigned for the purpose of forming a Wisconsin limited liability company under Ch. 183 of the Wisconsin statutes:

Article 1. Name of the limited liability company:

Cross Country Sales, LLC

Article 2. The limited liability company is organized under Ch. 183 of the Wisconsin

Statutes.

Article 3. Name of the initial registered agent.

Dirk S Nohre

Article 4. Street address of the initial registered office.

4228 Southtowne Drive Eau Claire, WI 54701 United States of America

Article 5. Management of the limited liability company shall be vested in:

Members

Article 6. Name and complete address of each organizer:

Dana E Brunstrom 4228 Southtowne Drive

Eau Claire, WI 54701 United States of America

Other Information This document was drafted by:

Dana E Brunstrom

Signature:

Dana E Brunstrom

Contact Information:

Dana E Brunstrom 4228 Southtowne Drive Eau Claire, WI 54701 United States of America dana@nohre.com 715-833-6749

Date & Time of Receipt: 11/17/2006 2:51:07 PM

Credit Card Transaction Number: 200611171019303

ARTICLES OF ORGANIZATION - Limited Liability Company (Ch. 183		
	Filing Fee: \$130.00 Total Fee: \$130.00	

ENDORSEMENT

State of Wisconsin Department of Financial Institutions

EFFECTIVE DAT	E
11/17/2006	
FILED 11/21/2006	Entity ID Number C067347