Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850) 222-1092 Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN DOMINIUM MANAGEMENT SERVICES, LLC

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https://efile.sunbiz.org/scripts/efilcovr.exe

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: Dominium Management Services, LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Nolde, Esq.

Name of Person

Winthrop & Weinstine

Firm/Company

225 South Sixth Street, Suite 3500

Address

Minneapolis MN 55402

City/State and Zip Code

tsteffen@Dominiuminc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Nolde, Esq.

at 612,604-6400

Name of Person

Area Code and Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallabassas Florida 2221

Tallahassee, Florida 32314

Enclosed is a check for the following amount:

□\$25 Filing Fcc

O S30 Filing Fcc & Certificate of Status

■ \$55.00 Filing Fee & Certified Copy

☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E123(8/07)

AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

1. The name of the li Department of State i	imited liability company s: Dominium Management Sen	as it appears on the records of the Florida	
2. This entity was for	rmed under the laws of:	Minnesota	- •
3. This entity was au	thorized to transact bus	iness in Florida on 07/07/2009	_
	nent/registration number		<u>-</u>
4. The name and add	lress of each manager or	r managing member is as follows:	
Title:		Name and Address:	
"MGR" = Manager			
"MGRM" = Managir	ng Member		
MGR		Paul R. Sween	
		2905 Northwest Boulevard, Suite 150	_
		Plymouth, MN 55441	-
			_
MGR		Armand E. Brachman	_
		2905 Northwest Boulevard, Suite 150	_
		Plymouth, MN 55441	_
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Required Signature:	<u> </u>		Z
	Signature of Manager,	Managing Member or Member	13,JUN 25
	Rilling C	Foe: \$25	
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