Florida Department of State Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

\*RE-SUBMIT\*

From:

Account Name : C T CORPORATION :
Account Number : FCA000000 22 ...
Phone : (850)222-1092

Fax Number

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

Foreign Limited Liability Company Tavernier, LLC

A. LUNT

MAY -2 2010

**EXAMINER** 

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95 🔂
\$125.00

April 27, 2010

C T CORPORATION SYSTEM

SUBJECT: TAVERNIER, LLC

REF: W10000020377

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other fillings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Limited company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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 cattle (850) 245-6094.

Agres Lunt

FAX Aud. #: H10000098480

850-617-8381 4/27/2010 11:23:30 AM PAGE 2/002 Fax Server

Regulatory Specialist II Letter Number: 110A00010332

### COVER LETTER

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istence, and check are s	binitted to register to	he above referenced foreign timited lints s matter to the following:  Mogan Schuetz	r Transact Business in Florida," Certific Ality company to transact business in Pl
ase return all correspond	lence concerning thi	Mogan Schuetz	
******			
		Name of Person	
	<u> </u>	Gorman & Company, Inc.	
		Firm/Company	
		200 N. Main St.	
		Address	
		Oregion, W1 53575	
		City/State and Zip Code	
	Papail address	mschuetz@gormanusa.com s: (to be used for future annual report m	orification)
further Information con-		•	Alliganon
iai iiki maamanan com	retining this mortor, p	ilption have	
	Megan Schuetz	at (60B)	835-3210
N	arne of Person	Area Code & Dayiinia Telepho	no Number
MAILING ADDR		STREET ADDRESS:	
Division of Corpora		Division of Corporations	
Registration Section P.O. Box 6327	ī	Registration Section Clifton Building	
Tallahassee, FL 323	114	2661 Executive Center Circle Talinhassee, FL 32301	•
		14(11)(1922)CE 1.17 257(1	
osed is a check for	the following am	ount:	

# WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

Members of Tavernier, LLC	
(Name of Limited Liability Company)	
a limited liability company duly organized and existing under the laws of	
Wisconsin,	
(State or Country of Organization)	
Because the name of this foreign limited liability company does not satisfy the	
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the	
following name to transact business in the state of Florida:	<b>~</b> 2
Tavernier I, LLC	<u> </u>
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.I.C., or LLC.)	PILE AMPR 2 6 AM
Date: 4/30/10	8 1
Signature(s) of Managor(s) and/or Managing Member(s):	₹ U
la la se	£2

CR2E122 (7/07)

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1	me of Foreign Limited Liability Comp	Tavemier, LLC		
onsent of	Tavernier   LLC (available, enter alternate name adopte the managers or managing members ac "L.L.C," "LLC.")	d for the purpose of tra- dopting the alternate nat	saoting business in Florida and no. The alternate name must incl	attach a copy of the writ ude "Limited Liability
2.	Wisconsin  Ion under the law of which foreign lin	3.		
(Jurisdict	ion under the law of which foreign lin is organized)	ilted llability	( FEI number, if applica	ble)
<b>}.</b>	3-11-10	5.	Perpetual	
	(Date of Organization)	(Dui	ation; Year limited liability com or "perpetual")	pany will cease to
. <u>N/A</u>				
*	(Date first transacted (See sections 608.50)	business in Florida, If p & 608,502 F.S. to deten	rior to registration.) nine penalty llability)	\$. <b>2</b>
200 Not	th Main Street			
Orceon.	Wi 53575			SEURETINAY SEURETINAY IMILIAH ASSE
	(\$	treet Address of Princip	al Office)	26 283
	11 to 4 to 5		1 1. 1 <b>\</b>	
	ed liability company is a manag		الإحسكا	
. The nat	me and usual business addresses	of the managing m	embers or managers are as	follows 🖫 👙
Gorman	& Company, Inc.			た
200 No	th Main Street			·
Oregon,	WI 53575			
ejurisdiction enstation of	Signature of a memo	(A photocopy is not according to be submitted.)  onducted or promote tate Overership and Development authorized 1608,408(3), F.S., the execution of the submitted 1608,408(3), F.S., the submitted 1608,408(3), F.S., the execution of the submitted 1608,408(3), F.S., the submitted 1608,408(3), F.S., the submitted 1608,408(3), F.S., the submitted 16	epuble. If the centificate is in a foreign and in Florida: clopment representative of a member	iciéu profinséer a
	en attitudion somet niedy	Gary J. Gorman	nees other health BIG IIIM)	
	Tunac	Lor printed some of	rinnee	

## 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.

Tavernier, LLC	
f unavailable, the alternate to be used in the state of Florida is:	
	<u> </u>
. The name and the Florida street address of the registered agent and office are:	DAPR 2
C T Corporation System	SSE 6
(Name)	
1200 South Pine Island Road	9: <b>12</b>
Fiorida Street Address (P.O. Box NOT ACCEPTABLE)	資産が
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.

By: (Signpture)

C T Corporation System

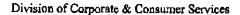
Assistant Socretary

Ashley Pipes

\$ 100.00
\$ 25.00
\$ 25.00
\$ 30.00
\$ 5.00
Certified Copy (optional)
\$ Certificate of Status (optional)

### 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

#### TAVERNIER, 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 March 11, 2010.

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 April 26, 2010.

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

Biffective 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:

77647-B678EFC4