Page 1 of 2

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 midit number (shown below) on the top and bottom of all pages of the document.

(((H110002726103)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA00000013 Phone : (850) 222-1092 Fax Number : (850)878-5368

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

Email Address:

## Foreign Limited Liability Company MODELLO HOMES, LLC

e ne e manualment nombre de monte proposition par un experience des partes de nombre de la compresión de la

Certificate of Status	0
Certified Copy	()
Page Count	05
Estimated Charge	\$125.00

B. BOSTICK NOV 17 2011 11 EXAMINER

## COVER LETTER

	stration Section sion of Corporations			
SUBJECT: 1	Modello Homes, LLC			
	N	ame of Limited Liability Con-	any	
The enclosed Existence, and	"Application by Foreign Limited Li f check are submitted to register the	ability Company for Authoriz above referenced foreign lim	ction to Transact Business in Flor ed fiability company to transact b	ida," Certificate of business in Florida
Please return a	all correspondence concerning this r	natter to the following:		
	Nicole Solheim			
	2-1-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	Name of Person		
	Gorman & Company, Inc.			
•	And the state of t	Firm/Company		
	200 North Main Street			
,	a) P # 44 <del>15 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</del>	Address		_
	Oregon, W1 53575			
		City/State and Zip Code		
	nsolheim@gormanusa.com			•
	E-mail address:	(to be used for future annual	eport notification)	
For further ini	ormation concerning this matter, pla	case call:		
Nicol	e Solheim	at ( 608	, 835-7822	LLAHASS
· md	Name of Person	Area Code & Daytime	Telephone Number	
Divis Regis P.O.	LING ADDRESS: tion of Corporations stration Section Box 6327 hassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Cli Tallahassee, FL 32301	rcle	AM 9: 49 EE FLORIDA
	a check for the following amo .00 Filing Fee \$\int_{\text{St30.00 Filing in Certificate of St}}\)	Fee & 3155.00 Filing Fee	e & 5160.00 Filing Fee, Certified Co	

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

IN COMPLIANCE WITH SECTION 608.503, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA

	Modello Homes, LLC	_	
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.C.")		
CO	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the name of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabi purpony," "L.L.C," "LL.C.")	written lily	
2.	Wisconsin 3, 45-3816320		
	(Jurisdiction under the law of which foreign timited liability (FEI number, if applicable) company is organized)	-	
4.	November 16, 2011 5. Perpetual		
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	•	
6.	,		
	(Date first transacted business in Florida, if prior to 'egistration.) (See sections 608,501 & 608,502 F.S. to determine penalty liability)	•	
7.	200 North Main Street		
	Oregon, W1 53575		
	(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:		
	Gorman & Company, Inc.	100	m
	<u> </u>	6	3
	200 N. Muín St.	=	í
	Oregon, WI \$3575	<u>م</u>	1
01	Attached is an original certificate of existence, no more than 90 days old, dufy authenicated by the official having custogs office.		
the	e jurisdiction under the law of which it is oxpanized. (A photocopy is not acceptable. If the certificate is in a foreign languitge, a		
tta	nslation of the certificate under onth of the translator must be submitted.)		
11	. Nature of business or purposes to be conducted or promoted in Florida: Real Estate	-	
	Mari S. Milliotte		
	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 perjory that the facts stated herein are true. I am aware they may false information submitted in a		
	document to the Department of State constitutes a third degree falony as provided for in \$.817.155, F.S.)  Joyce Wastrich, Corporate Secretary, Gorman & Company, Inc.		
	Typed or printed name of sign: e		

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 cr 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	e of the Limited Liab	pility Comp	any is:	
7	le, the alternate to be	used in the	state of Florida in:	
				AND AND THE PROPERTY OF THE PARTY OF THE PAR
.z. The name	and the Fiorida stre	et address	of the registered agent and office are:	
	C T Corporation Sy	stein		
			(Name)	1
	1200 South Pine Isla			
,	Flori	la Street Add	ress (P.O. Box <u>NOT ACCEPTABLE)</u>	
	Plantation		FL 33324	
			City/Stute/Zip	
liability compagent and ag relating to th	oany at the place desi ree to act in this capa e proper and complu f my position as regis	ignated in th wity. I furth te performa	o accept service of process for the above st his certificate, I hereby accept the appointn her agree to comply with the provisions of a noe of my duties, and I am familian with an as provided for in Thapter 608, Florida St	nent as registered all statutes d accept the
	By: P.	beccu. P	Ecwish.	
	the control of the co	(Signa	dure)	
		\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)	SECRETARIASSE TALLAHASSE

### 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, PAUL M. HQLZEM, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

#### MODELLO HOMES, LLC

is a dimestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is November 16, 2011.

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.

11 NOV 16 AH 9: 8

IN TESTIMONY WHEREOF, I have figurency hand and affixed the official seal of the Department on November 16, 2011.

PAUL M. HOLZEM, Administrator Division of Corporate and Consumer Services Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions proviously 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: .

98785-CD6B79C2