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SECRETARY OF STATE DIVISION OF CORPORATIONS

'JUN 2 9 2012 T. HAMPTON

#### COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: BCI Burke Company, 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:
Lisa Lahr
Name of Person
BCI Burke Company, LLC
Firm/Company
660 Van Dyne Road
Address
Fond du Lac, WI 54937
City/State and Zip Code
llahr@bciburke.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lisa Lahr at (920 ) 921-9220
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations
Registration Section Registration Section P.O. Box 6327 Clifton Building
Tallahassee, FL 32314  2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Bigsim \mathbb{\text{\$\frac{1}{25.00}\$ Filing Fee}}} \Bigsim \mathbb{\text{\$\frac{1}{25.00}\$ Filing Fee & Certificate of Status}} \Bigsim \mathbb{\text{\$\frac{1}{25.00}\$ Filing Fee & Certificate Opy}}} \Bigsim \mathbb{\text{\$\frac{1}{25.00}\$ Filing Fee & Certificate Opy}} \Bigsim \tex

## 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. BCI Burke Company, LLC (Name of Foreign Limited Liability Company; must inclu	ide "Limited Liability Company," "L.L.C.," or "LLC	")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the alter Company," "L.L.C," "LLC.")	se of transacting business in Florida and attach a coprate name. The alternate name must include "Limite	y of the writte
2. WI 3	3 39-1900568	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)	
4. July 23, 1997	5 perpetual	
(Date of Organization)	(Duration: Year limited liability company will contain exist or "perpetual")	ease to
6.		
(Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	orida, if prior to registration.)  to determine penalty liability)	
7 660 Van Dyne Road		<b>12</b>
		MORE SECURE
Fond du Lac, WI 54937	CD: LOCE	(**)
(Street Address	of Principal Office)	75 CO YES
8. If limited liability company is a manager-managed	company, check here	OF STA
9. The name and usual business addresses of the mana	aging members or managers are as follows:	:- 5 5 5 5 5 5 5 5
Tim Ahern & Mark Sondergard		***
660 Van Dyne Road		
Fond du Lac, WI 54937		
10. Attached is an original certificate of existence, no more than 90 of the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be subm	y is not acceptable. If the certificate is in a foreign langu	
11. Nature of business or purposes to be conducted or	r promoted in Florida: Playground Equip	ment
Mark Gorderge	ard	
Signature of a member or an au	thorized representative of a member.	
(In accordance with section 608 408(3) F.S. the exec	ution of this document constitutes an affirmation under the	:

Typed or printed name of signee

Mark Sondergard

penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.307, 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	of the Limited Liability Company is:	
BCI Burk	ke Company, LLC	<u> </u>
If unavailable,	e, the alternate to be used in the state of Florida is:	
Site Horiz	zons	
2. The name a	and the Florida street address of the registered agent and office are:  Mary Langley	
	(Name)	
	556 Lake Cove Pointe Circle  Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Winter Garden FL 34787 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.

Mary Langley (Signature)

\$ 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, PAUL M. HOLZEM, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

#### **BCI BURKE COMPANY, 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 July 23, 1997.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on June 12, 2012.

Paul M. Holem

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 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:

107319-6091CF0A