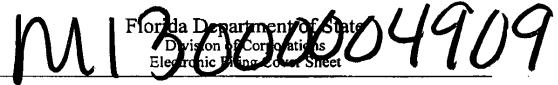
Division of Corporations

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Page 1 of 1



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

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Phone Fax Number

: (850) 978-5368

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

mail	Address:	

Foreign Limited Liability Company S & L Properties Cape Coral, LLC

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

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D. BRUCE

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Help

CK28027 (9/10)			COVER	LETTER				•	
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SUBJECT:		Name	of Limited	Liability Com	ipany				
		eign Limited Liability of to register the above							
Please return all or	orrespondence co	oncerning this matter	r to the foll	owing:					
		1	Richard A.	Latta, Esq.					
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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 BY KINESS IN THE STATE OF STORIDA:

1.	IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: S & L Properties Cape Coral, LLC	
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
Co	If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the wi onsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability company," "L.L.C," "LLC.")	
	Delaware 3. (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	
	company is organized) 07/23/2013 Perpenial	
4.	(Date of Organization) (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6.		
	(Date first transacted business in Florida, If prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7 .		Contract
	Portage, WI 53901	STATES
	(Street Address of Principal Office)	Cartetana
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:	1
	Chad. A. Stevenson, 2651 Kirking Ct., Portage, WI 53901	
	Jeffrey J. Liegel, 2651 Kirking Ct., Portage, WI 53901	
	O. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rec	ords in
	re jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anstation of the certificate under cath of the translation must be submitted.)	
11	Nature of business or purposes to be conducted or promoted in Florida: commercial real estate holdings	
	Con no	
	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 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.)	
	Joffrey J. Liegol	

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.

I. The name of the Lim S & L Properties Cape Cora	nited Llability Company is: al, LLC		
If unavailable, the altern	nate to be used in the state of Florida is:		_
2. The name and the Fi	orida street address of the registered agent and office are:		-
	C T Corporation System		2
	(Name)) 13
	· 1200 South Pine Island Road	프를	
	Plorida Street Address (P.O. Box NOT ACCEPTABLE)	L SSE 1.3.SE	5
Plantatio	on FL 33324	PA.	
	City/State/Zip .	TATE ORIO	6 1 .6

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: (Signature)

C T Corporation System

Angel Shearer

Assistant Secretary

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

PAGE :

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "S & L PROPERTIES CAPE CORAL, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF AUGUST, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5372205 8300

130958514

You may verify this cortificate obline at cosp. delaware.gov/authver.shtml

AUTHENTICATION: 0643207

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DATE: 08-06-13