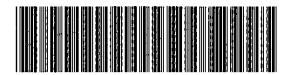
# M13000006537

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only





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SECRETARY OF STATE
TALLAHASSEE FLORINA

T. Burch OCT. 1 6 2013.

·CR2E027 (9/10)

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT: Superior Sailsport 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:

Michael Kahlstorf
Name of Person
Superior Sailsport LLC
Firm/Company
13385 - 207th Avenue NW
Address
Elk River, MN 55330
City/State and Zip Code
mkahlstorf@msn.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

### Michael Kahlstorf

,763 、241-3917

Name of Person

Area Code & Daytime Telephone Numbe

#### **MAILING ADDRESS:**

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

#### STREET ADDRESS:

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

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee □ \$130.5

☐ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

■ \$160.00 Filing Fee, Certificate of Status & Certified Copy

ì,

## 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:

Company," "L.L.C," "LLC.")	e of transacting business in Florida and attach a copy of the writte nate name. The alternate name must include "Limited Liability
<sub>2</sub> Minnesota 3,	46-3826572
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
November 2006 5.	perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
). 	
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S.)	rida, if prior to registration.) to determine penalty liability)
13385 - 207th Avenue NW	LLA S
Elk River, MN 55330	T 15
(Street Address of	of Principal Office) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
B. If limited liability company is a manager-managed of	
. The name and usual business addresses of the mana	> \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Michael Kahlstorf	
13385 - 207th Avenue NW	
Elk River, MN 55330	
O. Attached is an original certificate of existence, no more than 90 one jurisdiction under the law of which it is organized. (A photocopy ranslation of the certificate under oath of the translator must be submit.  Nature of business or purposes to be conducted or	nitted.)
1. Tractate of business of purposes to be conducted of	promoted in Promote.
much yo	
Signatura of a mambar ar ar aut	horized representative of a member.

Typed or printed name of signee

Michael Kahlstorf

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 608.507, 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 of the Limited Liability Company is:	
Superior Sailsport LLC	
If unavailable, the alternate to be used in the state of Florida is:	
	<u> </u>
2. The name and the Florida street address of the registered agent and office are:	DCT 15 CALLARY LLAHASSE
Northwest Registered Agent LLC	ு நூ
(Name)	PM 3: 2 FISTATE FLORID
3030 N. Rocky Point Dr. STE 150A	22 TE IDA
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Tampa <sub>FL</sub> 33607	
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.

Dan Keen-Manager
(Signature)

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

#### Office of the Minnesota Secretary of State Certificate of Good Standing

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name: Superior Sailsport, LLC

Date Filed: 11/30/2006

File Number: 2114102-2

Minnesota Statutes, Chapter: 322B

Home Jurisdiction: Minnesota

This certificate has been issued on: 10/08/2013

B OCT 15 PM 3: 2



Mark Ritchie

Secretary of State

State of Minnesota