

#113000007723

Dec. 23, 2013 9:37AM  
Division of Corporations

SALVATORI & WOOD

No. 129 P. 1 of 1

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H13000280911 3)))



H130002809113ABCZ

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : SALVATORI & WOOD, BUCKEL, PL  
Account Number : I20030000112  
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
FOREST WAY CAPITAL LLC

Certificate of Status	0
Certified Copy	0
Page Count	08
Estimated Charge	\$25.00

K. SALLY  
EXAMINER  
DEC 26 2013

Electronic Filing Menu

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Help

((H13000280911 3)))

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Forest Way Capital LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kevin Lottes, Esq.

Name of Person

Salvatori, Wood, Buckel, Carmichael & Lottes

Firm/Company

9132 Strada Place, Fourth Floor

Address

Naples, FL 34108

City/State and Zip Code

krl@swbcl.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin Lottes

Name of Person

at ( 2395 ) 552-4100

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|---|---|--|--|

CR2E062 (4/13)

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ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

FILED  
13 DEC 23 PM 1:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

**FIRST:** The name of the limited liability company is:  
Forest Way Capital LLC

**SECOND:** The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  
Randy Lauer is incorrectly listed as MGRM


The correct MGRM is:

Randall S. Lauer, as Trustee of the Randall S. Lauer Trust

**OR**

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: December 23, 2013

  
Signature of a member or authorized representative of a member

Kevin Lottes, Incorporator

Typed or printed name of signee

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

((H13000280911 3)))

# State of Florida



## Department of State

I certify the attached is a true and correct copy of the application by FOREST WAY CAPITAL LLC, an Illinois limited liability company, authorized to transact business within the state of Florida on December 9, 2013, as shown by the records of this office.

I further certify the document was electronically received under FAX audit number M13000269082. This certificate is issued in accordance with section 15.16, Florida Statutes, and authenticated by the code noted below.

The document number of this limited liability company is M13000007723.

Authentication Code: 313A00028011-121013-M13000007723-1/1



Given under my hand and the  
Great Seal of the State of Florida,  
at Tallahassee, the Capital, this the  
Tenth day of December, 2013

*Ken Detzner*  
Ken Detzner  
Secretary of State

((H13000269082 3)))

CR25027 (9/10)

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Forest Way Capital 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:

Kevin Lottes, Esq.

Name of Person

Salvatori, Wood, Buckel, Carmichael & Lottes

Firm/Company

9132 Strada Place, Fourth Floor

Address

Naples, FL 34108

City/State and Zip Code

krl@swbcl.com

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin Lottes

Name of Person

239

552-4100

Area Code & Daytime Telephone Number

**MAILING ADDRESS:**

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

**STREET ADDRESS:**

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

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☒ \$155.00 Filing Fee &  
Certified Copy

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

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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN  
LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Forest Way Capital LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written  
consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability  
Company," "L.L.C.," "LLC.")

2. IL(Jurisdiction under the law of which foreign limited liability  
company is organized)

## 3. \_\_\_\_\_

(FBI number, if applicable)

4. 05/04/2012

(Date of Organization)

5. Perpetual(Duration: Year limited liability company will cease to  
exist or "perpetual")6. N/A(Date first transacted business in Florida, if prior to registration,  
(See sections 608.501 & 608.502 F.S. to determine penalty liability))7. 946 Pine Tree Lane, Winnetka, IL 60093

(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:

Randy Lauer, MGRM946 Pine Tree LaneWinnetka, IL 60093

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in  
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a  
translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Rental Property  
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.)

Randy Lauer, Sole Member

Typed or printed name of signee

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((H13000269082 3)))

**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:

Forest Way Capital LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Kevin Lottes, Esq.

(Name)

9132 Strada Place, Fourth Floor

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Naples

FL 34108  
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.*



(Signature)

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

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((H13000269082 3)))

File Number 0399222-5



*To all to whom these Presents Shall Come, Greeting:*

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that*

FORBET WAY CAPITAL LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MAY 04, 2012, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



Authentication #: 1993002000

Authenticate at: <http://www.cyberdriveillinois.com>

*In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 5TH day of DECEMBER A.D. 2013*

*Jesse White*

SECRETARY OF STATE

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