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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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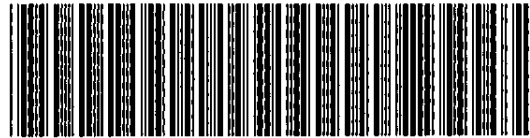
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRET
TALLAHASSEE, FLORIDA

JAN 13 2013

T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jacob Lutz Estate Recreation Lease 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:

Jon Jay Ferdinand, Esquire

Name of Person

Ferdinand & Sullivan, P.A.

Firm/Company

441 S. State Road 7- Suite 20

Address

Margate, FL 33068

City/State and Zip Code

fsflalaw@bellsouth.net

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

For further information concerning this matter, please call:

Jon Jay Ferdinand at 954 977-4004

Name of Person

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
Clifton 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

Ferdinand & Sullivan, P.A.

Attorneys at Law
441 South State Road 7
Suite 20
Margate, FL 33068

Jon J. Ferdinand
Karen Sullivan

Broward: 954-977-4004
Fax: 954-977-4141
email address: fsflaw@bellsouth.net

January 2, 2014

CERTIFIED MAIL, RETURN RECEIPT REQUESTED

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

Re: **Application by Foreign Limited Liability Company for
Authorization to Transact Business In Florida by Jacob Lutz
Estate Recreation Lease LLC**
Our File No.: 2007-2215

Dear Sir or Madam:

Please find enclosed the following:

1. **Cover Letter;**
2. **Application By Foreign Limited Liability Company For
Authorization to Transact Business in Florida with an original
certificate of existence attached;**
3. **Certificate of Designation of Registered Agent/Registered
Office;**
4. Check #1026 payable to the Florida Department of State in the
amount of \$160.00, for filing fee of \$100.00, \$25.00 for
Designation of Resident Agent, \$30.00 for a certified copy,
\$5.00 for Certificate of Status.

Please return the letter of acknowledgment and certified copy, and
Certificate of Status in the enclosed self-addressed, stamped
envelope.

Division of Corporations
January 2, 2014
Page 2

Thank you for your consideration with regards to the above matters
and if you have any questions regarding same, please advise.

Very truly yours,



JON JAY FERDINAND
For the Firm

Enclosures

2007-2215\101022014.divisionofcorporation

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

IN COMPLIANCE WITH SECTION ⁶⁰⁵~~608.503~~, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Jacob Lutz Estate Recreation Lease 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. State of Indiana

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

3. 46-1969878

(FEI number, if applicable)

4. January 30, 2013

(Date of Organization)

5. Perpetual

(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. 3546 Inverness Boulevard, Carmel, In 46032

(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:

Diane Lutz 3546 Inverness Boulevard, Carmel, In 46032

Barry Lutz 14434 White Birch Valley Lane, Chesterfield, MO 63017

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: Ownership, development,
operation, and management of Florida real and personal property and businesses and related business activities

Diane S. Lutz

Signature of a member or an authorized representative of a member.

(In accordance with section ⁶⁰⁵~~608.406(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.)

Diane Lutz

Typed or printed name of signee

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2014 JAN -8 AM 10:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION ⁶⁰⁵~~608.415~~ or ⁶⁰⁵~~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:

Jacob Lutz Estate Recreation Lease 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:

Ferdinand & Sullivan, P.A.

(Name)

441 S. State Road 7 - Suite 20

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

Margate

FL

33068

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 JAN -8 AM 10:57

FILED

**STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE**

To Whom These Presents Come, Greeting:

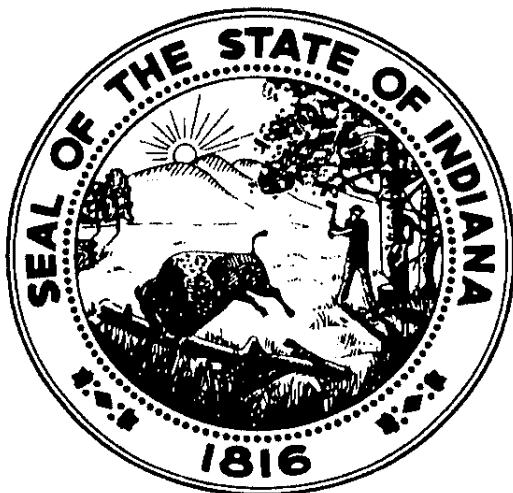
I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

JACOB LUTZ ESTATE RECREATION LEASE LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on January 30, 2013, and was in existence or authorized to transact business in the State of Indiana on December 09, 2013.

I further certify this Domestic Limited Liability Company (LLC) has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand
and affixed the seal of the State of Indiana, at the
City of Indianapolis, this Tenth Day of December, 2013.

Connie Lawson

CONNIE LAWSON, Secretary of State

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