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K.SALY EXAMINER APR 25 2014



April 11, 2014

BAMBERGER ATTORNEYS AT LAW JOHN P BROADHEAD 20 NW 4TH ST, P.O. BOX 657 EVANSVILLE, IN 47704

SUBJECT: SKK KEY WEST, LLC Ref. Number: W14000023265

We have received your document for SKK KEY WEST, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 214A00007890



Bamberger, Foreman, Oswald & Hahn, LLP

John P. Broadhead Direct phone: (812) 452-3577 Email: ibroadhead@bamberger.com

April 3, 2014

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

Re:

SKK Key West, LLC

Ladies and Gentlemen:

I am sending this letter in behalf of my client, SKK Key West, LLC, an Indiana limited liability company. The company's managers would like to register to do business in the State of Florida. To that end, the following documents are enclosed:

- Cover Letter.
- Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida,
- Certificate of Designation of Registered Agent/Registered Office,

Sincerely

- · Certificate of Organization issued by the Indiana Secretary of State's office, and
- Check for \$130 for the filing fees and a Certificate of Status

Please send the letter of acknowledgment and Certificate of Status to my office as indicated on the cover letter form. If you have any question or need additional information please call me at (812) 452-3577. Thank you for your prompt attention in this matter.

John P. Broadhead Bamberger, Foreman,

Oswald & Hahn, LLP

JPB/mmr Enclosures

Cc via email

Karen Kahre w/ enclosures Steve Kahre w/ enclosures

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#### COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: SKK Key West, LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate 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:
John P, Broadhead
Name of Person
Bamberger, Foreman, Oswald, & Hahn, LLP
Firm/Company
20 NW Fourth Street, P.O. Box 657
Address
Evansville, IN 47704
City/State and Zip Code
rec@bamberger.com
E-mail address; (to be used for future annual report notification)
For further information concerning this metter, please call:
John P. Broadhead at 812 3 452-3577
Name of Contact 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:
☐ \$125.00 filing Fee



7th Floor Hulman Building



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

ATTN: KAREN A. SALY

Bamberger, Foreman,

Recipient's fax number:

Please deliver the following page(s) to:

(850) 245-6030

Ref. Number:

W14000023265

Sent from:

Michelle Robinson, Paralegal

Date sent:

April 25, 2014

BFOH file number:

62625

Number of page(s):

6 (including this cover sheet)

MESSAGE:

As per our phone conversation on April 18, 2014, attached please find your letter of April 11, 2014, the form Cover Letter, the Application by Foreign LLC for Authorization with Chapter 605 reference, the Certificate of Designation of Registered Agent with Chapter 605 reference, and the Certificate of Existence for SKK Key West, LLC issued by the Indiana Secretary of State.

Thank you for your assistance with this matter.

ORIGINAL WILL NOT FOLLOW

If you do not receive all pages, please call us immediately and ask for:

Michelle Robinson at 812.452.3540

This transmittel is intended only for the use of the addressee and may contain information that is privileged, confidential and exempt from disclosure by law. If the reader of this transmittal is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone, and return the original transmittal to us by mall. Thank you.

Rev. 04/28/11

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. SKK Key West, 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 Fiorids. The atternate name must include "Limite Liability Company," "L.L.C," or "LLC.")	1
2. Indiana 3. 46-517132	
(Jurisdiction under the law of which foreign limited liability (FEI number, (Fepplicable) company is organized)	
4. N/A 900 900 900 900 900 900 900 900 900 90	2
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	7014 APR
5. 11901 Darmstadt Road <u>至</u>	√R 25
Darmstadt, IN 47725	
(Strest Address of Principal Office)	PH
6. Same as above	رن ئ
	!
(Malling Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
Karen A. Kahre, Manager, 11901 Darmstadt Road, Darmstadt, IN 47725	
Steven W. Kahre, Manager, 11901 Darmstadt Road, Darmstadt, IN 47725	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the offici having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not	al
acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translation that the submitted)	tor
A Doll De	
train of Jake Manager	
Signature of an authorized person (in accordance with section 605.0203, F.S., the execution of this document constitutes an effirmation under the penalties of parjury that the facia stated herein a	ire true. Ì
am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in a.817.155, P.S.)	
Karen A. Kahre, Manager	

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT STATUTES	TO THE PRO	OVISIONS OF SE	CTION 605.0113 or 605.0902 (1)(d), FLC ED LIABILITY COMPANY SUBMITS TO	PRIDA HR
FOLLOWIN	O STATEME THE STATE O	NT TO DESIGNA	TE A REGISTERED OFFICE AND REC	
	of the Limite West, LLC	d Liability Compa	any is:	2014 APR 25 PH 5: 1
If unavallable	c, the alternate	to be used in the	state of Florida is:	PH 5: 11
2. The name	and the Florid	ia street address o	of the registered agent and office are:	<del></del>
	NRAI S	ervices, inc.		
		,	(Name)	
	1200 S	outh Pine Island R	Road	
		Florida Street Add	ress (P.O. Box NOT ACCEPTABLE)	
	Planta	Han		
			PI 33324 City/State/Zip	
liability compregistered as statutes relat	pany at the pla ent and agree ing to the prop	ce designated in th to act in this capa er and complete p	o accept service of process for the above stails certificate, I hereby accept the appointments. I further agree to comply with the processor and I am familial tered agent as provided for in Chapter 605  Rachel Glasheen, VP & A NRA! Services, Inc.	nent as rvisions of all r with and i, Florida
		(Signal	iure)	
		\$ 100.00 \$ 25.00 \$ 30.00	Filing Pee for Application Designation of Registered Agent Certified Copy (optional)	

Certificate of Status (optional)

5.00

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

To Whom These Presents Come, Greetings:

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 proper official to execute this certificate.

I further certify that records of this office disclose that

#### SKK KEY WEST, LLC

duly filed the requisite documents to commence business activities under the laws of State of Indiana on March 11, 2014, and was in existence or authorized to transact business in the State of Indiana on April 21, 2014.

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 Indians, at the city of Indianapolis, this Twenty-First Day of April, 2014.

Corrie Lawson

Connie Lawson, Secretary of State

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