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SECRETARY OF STATE

JIL 25 2014 J. HARRIS

#### **COVER LETTER**

TO:	Registration Section
	Division of Corporation

Ciesta Key Rentals, 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:

· · · · · · · · · · · · · · · · · · ·	idence concerning this matter	to the following.			
Ster	phen A. Bien				
		Name of Person			_
Cies	sta Key Renta	als, LLC			
<del></del>		Firm/Company			
332	0 Anric Drive				
		Address			<del></del>
Eau	Claire, WI 54	1701			
		City/State and Zip Code			_
stev	e.bien@clacc	nnect.com			
<del></del>	E-mail address: (to	be used for future annual rep	ort notificat	tion)	_
For further information co	ncerning this matter, please c	all:			
Steve B	Bien	<sub>at (</sub> 715	577	-0696	
	Name of Contact Person	Area Code	Dayt	ime Telephone Number	<del></del>
MAILING ADD Division of Corporation Sect P.O. Box 6327 Tallahassee, FL 3	orations	TREET ADDRESS: Division of Corporations Registration Section Clifton Building 661 Executive Center Circ Callahassee, FL 32301	cle		
Enclosed is a check for \$125.00 Filing	or the following amount: g Fee	ee & 🗆 \$155.00 Filing		□ \$160.00 Filing Fee, of Status & Certific	

### 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. Ciesta Key Rentals, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.,"	2 on #11 (C 22)
(Name of Poteign Limited Liability Company, must include Limited Liability Company, L.L.C.,	or LLC. J
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate Liability Company," "L.L.C," or "LLC.")	name must include "Limited
<sub>2.</sub> Wisconsin <sub>3.</sub> 47-1359792	
(Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if application under the law of which foreign limited liability company is organized)	licable)
August 20, 2014 - anticipated closing date on purchase of FL r	ental property
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	14 Si Si
<sub>5.</sub> 8412 Sylvan Woods Dr.	SION
Sarasota FL 34243	25
(Street Address of Principal Office)	
(Same)	<u> </u>
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to	manage is/are:
Stephen A. Bien,3320 Anric Dr, Eau Claire Wl	
Member/Manager	
<u> </u>	
·	<u> </u>
8. Attached is an original certificate of existence, no more than 90 days old, duly authorized	
naving custody of records in the jurisdiction under the law of which it is organized. (A acceptable. If the certificate is in a foreign language, a translation of the certificate under	
must be submitted)	ici oatii oi tiic transiatoi
Tent H	
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perj	ury that the facts stated herein are tru

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.)

Stephen A. Bien

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	the Limited Liability Company by Rentals, LLC	is:		
If unavailable, th	ne alternate to be used in the sta	te of Florida is:		•
2. The name and	the Florida street address of the Susan A. Miller	ne registered agent and office are:		
		(Name)	11	AIG.
	8412 Sylvan Woo	ds Dr	JUL 25	SECRETAR ISION OF I
	Florida Street Address	(P.O. Box NOT ACCEPTABLE)		35 35 5
	Sarasota	FL 34243	PM 3: 58	F SIATE PORATION
		City/State/Zip	w	7

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 605, 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)

### United States of America State of Wisconsin

#### DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

I, GEORGE PETAK, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

#### CIESTA KEY RENTALS, LLC

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is July 15, 2014.

I further certify that said corporation or limited liability company has not yet completed its initial report year and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that said corporation or limited liability company has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on July 17, 2014.

GEORGE PETAK, Administrator

Division of Corporate and Consumer Services

Department of Financial Institutions

Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: http://www.wdfi.org/apps/ccs/verify/

Enter this code:

140082-07960199