M14000007105

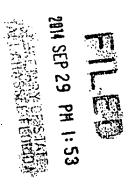
(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
,	,	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300264721643

09/29/14--01024--024 **125.00



OCT 0 2 2014 J. BRUCE



COVER LETTER

TO: **Registration Section Division of Corporations**

D'Amico Catering, 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:

Tim Traynor	
	Name of Person
D'Amico & Partn	ers, Inc.
	Firm/Company
211 North First S	St., Suite 175
	Address
Minneapolis, MN	l 55401
	City/State and Zip Code
ttraynor@damico	o.com
E-mail address: (to	o be used for future annual report notification)
For further information concerning this matter, please	call: P 29
Tim Traynor	_a 612 \ 317-4222 🗒 😦
Name of Contact Person	Area Code Daytime Telephone Number
Division of Corporations	STREET ADDRESS: Division of Corporations Parimetrial Services

<u> MAII</u>

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

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

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. D'Amico Catering, 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. The alternate name must include Liability Company," "L.L.C," or "LLC.")	e "Limited
_{2.} Minnesota _{3.} 46-0698721	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	
4	· - · ·
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
_{5.} D'Amico & Partners, Inc.	
man and the second of the seco	2
(Street Address of Principal Office)	SE TO
6. 2111 W. 1111 W. 1100 1100 1100 1100 1100	3
Minneanolis MN 55401	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is are	ယ
Paul J. Smith, Treasurer	
211 North First Street, Suite 175	
Minneapolis, MN 55401	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by th having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the must be submitted) Signature of an authorized person	not
(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts state am aware that any false information submitted in a document to the Department of State constitutes a third degree fellony as provided for in s.817.155	

Paul J. Smith

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.

	ne of the Limited Liability (ico Catering, LL	• •		_
If unavaila	ble, the alternate to be used	in the state of Florida is:		
2. The nar	ne and the Florida street add	dress of the registered agent and office are:		-
	Richard D'Amico		22	
	-	(Name)	H SEP	
	1177 Third Street South		P 29	
Florida Street Address (P.O. Box ?		eet Address (P.O. Box NOT ACCEPTABLE)		1
	Naples,	_{E1} 34102	SIM T	

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.

City/State/Zip

\$ 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:

D'Amico Catering, LLC

Date Filed:

03/07/2003

File Number:

39233-LLC

Minnesota Statutes, Chapter:

322B

Home Jurisdiction:

Minnesota

This certificate has been issued on:

09/18/2014



Mark Ritchie
Mark Ritchie

Secretary of State State of Minnesota