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SECRETARY DESTAIR

J. Shivers DEC 15 2014

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Wild Fryers, 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:
Michelle Tollefson Name of Person
Wild Fryers, LLC Firm/Company
5150 Boggy Creek Rd. #P61
St. Cloud, FL 34771 City/State and Zip Code
Wild fryers Dymail COM Ge-mail address: (b) be used for future annual report notification)
For further information concerning this matter, please call:
Michelle Tollefson at (715) 456-0831 Name of Contact 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: \$\begin{align*} \begin{align*} \text{\$125.00 Filing Fee} & \Boxed & \$\text{\$130.00 Filing Fee & Certificate of Status} & \text{\$Certified Copy} & \text{\$\text{\$0.00 Filing Fee, Certified Copy}} \end{align*} \$\begin{align*} \begin{align*}

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. Wild Frues L.L.C. (Name of Foreign Dimited 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 "Limited		
Liability Company," "L.L.C," or "LLC.")		
2. Dubugue, Towa 3. 46-5134768 (Jurisdiction under the law of which foreign limited liability company is organized) 3. 46-5134768 (FEI number, if applicable)		
4. 1/1/2015		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
5. 5150 Boggy Creek Rd. # Pb1		
St. Cloud, FL 34771 (Street Address of Principal Office)		
6. 5150 Boggy Creek Rd # Pb1		
10 0 mm		
St. Cloud, FL 34771 (Mailing Address)		
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are?		
Michelle Tolle-Ison-Owner-5150 Boggy Creek Rd # Pbl St. Cloud FL 34771		
Kon Schemenauer - owner - same address		
8. 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)		
4 - 1		
diale I /oly		
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 perjury that the facts stated herein are true		
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.)		

Michelle L. Tolletson
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.

1. The name of the Limited Liability Company is:	
Wild Fryers, 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:	

Michelle Tollefson	_
(Name)	14 SEC
5150 Boggy Creek Rd, # P6) Florida Street Address (P.O. Box NOT ACCEPTABLE)	DEC -
St-Cloud FL 34771	SET A TH
City/State/Zip	7: 55 STATE STATE

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)

IOWA SECRETARY OF STATE MATT SCHULTZ



CERTIFICATE OF EXISTENCE

Date: 11/21/2014

Name: WILD FRYERS, L.L.C. (489DLC - 474842)

Date of Incorporation: 4/7/2014

Duration: PERPETUAL

- I, Matt Schultz, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the limited liability company named on this certificate:
 - a. The entity is in existence and duly incorporated under the laws of Iowa.
 - b. All fees, taxes and penalties required under the Revised Uniform Limited Liability Company Act and other laws due the Secretary of State have been paid.
 - c. The most recent biennial report required has been filed with the Secretary of State.
 - d. The Secretary of State has not administratively dissolved the limited liability company.
 - e. The Secretary of State has not filed either a statement of dissolution or statement of termination.

Certificate ID: CS100073

To validate certificates visit: sos.iowa.gov/ValidateCertificate

Matt Schultz, Iowa Secretary of State