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T. BROWN



February 2, 2015

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re: Order #

Order #: 9428554 SO

Customer Reference 1: None Given Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Chamberlin Partners, LLC (WI) Registration Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092.

Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

ANDERSON AQUINO LLP COUNSELORS AT LAW 240 LEWIS WHARF BOSTON, MASSACHUSETTS 02110

TELEPHONE: (617) 723-3600 FACSIMILE: (617) 723-3699

James G. Topetzes jtopetzes@andersonaquino.com

January 28, 2015

VIA OVERNIGHT COURIER

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

Re: Chamberlin Partners, LLC – a Wisconsin Limited Liability Company

Ladies and Gentlemen:

Enclosed for filing on behalf of Chamberlin Partners, LLC (the "Company"), a Wisconsin limited liability company seeking authority to transact business in Florida, are (a) the Company's form Cover Letter, (b) the Company's Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, (c) the Company's Certificate of Designation of Registered Agent/Registered Office, (d) an original Certificate of Status regarding the Company, issued by the Wisconsin Department of Financial Institutions, and (e) a check in payment of the prescribed fees (for filing and for designation of a registered agent/office) of \$125.00.

If you have any questions regarding the foregoing or the enclosed, please contact me directly.

Very truly yours,

James G. Topetzes

James C. Graf

cc:

COVER LETTER

SUBJECT:	Chamberlin Partners, LLC	
	Name of Limited Liability Company	
The enclosed Existence, and	d "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Ce nd check are submitted to register the above referenced foreign limited liability company to transact business	ertificate of s in Florida
Please return a	n all correspondence concerning this matter to the following:	
ı	James G. Topetzes	
	Name of Person	
	Anderson Aquino, LLP	
	Firm/Company	
	240 Lewis Wharf	
	Address	
	Boston, MA 02110	
	City/State and Zip Code	
	jim@topetzes.com	·
	E-mail address: (to be used for future annual report notification)	
For further info	formation concerning this matter, please call:	
Jam	mes G. Topetzes 617 686-0553	
	Name of Contact Person Area Code Daytime Telephone Number	
Division Registr P.O. B	ILING ADDRESS: sion of Corporations stration Section Box 6327 clifton Building chassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a	a check for the following amount: 25.00 Filing Fee Status Status Status Certified Copy Status & Certified Copy a check for the following amount: \$155.00 Filing Fee Status Status Certified Copy \$160.00 Filing Fee, Certified Copy of Status & Certified Copy	

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

(Name of Foreign Lin	mited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	_
	e name adopted for the purpose of transacting business in Florida. The alternate name must include "Li	_ mited
iability Company," "L.L.C," or "L	LC.")	
Wisconsin	3.	
(Jurisdiction under the law of whi	nich foreign-limited liability (PEI number, if applicable)	_
company is organized)		gi.
•		,
((Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	5
1140 Briarcliff Trail		-0
Brookfield, WI 53045	5	~
	(Street Address of Principal Office)	ے` ـ
c/o James G. Topetzes	es, Anderson Aquino, LLP, 240 Lewis Wharf	
<u> </u>	, 20 120 3	-
Boston, MA 02110		
	(Mailing Address)	
	(Maiing Address)	
	(Mailing Address)	
The name, title or capac	city and address of the person(s) who has/have authority to manage is/are:	
	city and address of the person(s) who has/have authority to manage is/are:	
imes C. Graf, Sole Mar	city and address of the person(s) who has/have authority to manage is/are:	
ames C. Graf, Sole Mar	city and address of the person(s) who has/have authority to manage is/are:	
ames C. Graf, Sole Mar	city and address of the person(s) who has/have authority to manage is/are:	
ames C. Graf, Sole Mar 40 Briarcliff Trail	city and address of the person(s) who has/have authority to manage is/are:	-
ames C. Graf, Sole Mar	city and address of the person(s) who has/have authority to manage is/are:	_
ames C. Graf, Sole Mar 40 Briarcliff Trail rookfield, WI 53045	city and address of the person(s) who has/have authority to manage is/are: nager	- - -
ames C. Graf, Sole Mar 40 Briarcliff Trail cookfield, WI 53045 Attached is an original ce	city and address of the person(s) who has/have authority to manage is/are: nager ertificate of existence, no more than 90 days old, duly authenticated by the of	- - ficial
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Attached is an original ceving custody of records in ceptable. If the certificate ast be submitted)	ertificate of existence, no more than 90 days old, duly authenticated by the of a the jurisdiction under the law of which it is organized. (A photocopy is not is in a foreign language, a translation of the certificate under oath of the translation of this document constitutes an affirmation under the penalties of perjury that the facts stated here	slato

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0002 (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.

	of the Limited Liability C Partners, LLC	ompany is:	ANG TO THE
If unavailable	, the alternate to be used i	n the state of Florida is:	2
2. The name	and the Florida street addi	ress of the registered agent and office are:	Only to
	James C. Graf		
		(Name)	•
1525 International Parkway, Suite 1011			
Florida Street Address (P.O. Box NOT ACCEPTABLE)			_
	Lake Mary,	327 4 6 Fl.	_
		City/State/Zip	

ţ

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)

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United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, GEORGE PETAK, Administrator, Division of Corporate and Consumer Services, do hereby certify that

CHAMBERLIN PARTNERS, 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 September 17, 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 January 27, 2015.

GEORGE PETAK, Administrator

Division of Corporate and Consumer Services

Department of Financial Institutions

BY

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.