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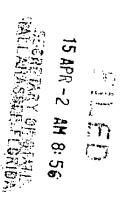
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PICK-UP	₩ WAIT	MAIL
<b>(B</b>	usiness Entity Na	me)
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Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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ACCORDED APR 20 2015

#### **COVER LETTER**

TO: **Registration Section Division of Corporations** 

JCRS Acquisitions, 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 of	oncerning this mat	ter to the	following:		
Nathan	Hurlbut				
		Na	me of Person		
Godfrey	/ & Kahn	, S.C	<b>)</b> .		
		Fi	m/Company		
200 S V	Vashingt	on S	treet, Ste	= 100	)
			Address		
Green I	Bay, WI	5430	01		
		City/St	ate and Zip Code		
nhurlbu	@gklaw				
For further information concerning			for future annual rep	ort notifica	lion)
Nathan Hui			_ <sub>at</sub> 920	436	-7668
Name o	f Contact Person		Area Code	<i></i>	time Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		Division Registra Clifton I 2661 Ex	T ADDRESS: of Corporations tion Section Building ecutive Center Circ see, FL 32301	de	
Enclosed is a check for the f  \$125.00 Filing Fee	ollowing amour \$130.00 Filing Certificate of S	Fee &	□ \$155.00 Filing 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:

JCRS Acquisitions, 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 "Limited hability Company," "L.L.C," or "LLC.")
Delaware 3. 47-1925558
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
, N/A
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
107 N. Pleasant View Road
Plymouth, WI 53073
107 N. Pleasant View Road, PO BOX 258
Plymouth, WI 53073-0258
(Mailing Address)
7. The name, title or capacity and address of the person(s) who has/have authority to manage is are:
James Sartori, Manager, 107 N. Pleasant View Road, Plymouth 701 53073
Jeff Schwager, Manager, 107 N. Pleasant View Road, Plymouth, WI 53073
Mark Schwechel, Manager, 107 N. Pleasant View Road, Plymouth, WI 53073
Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official aving custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not cceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator nust be submitted)
Signature of an authorized person
n 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 tree naware 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.)
Mark Schwechel, Manager

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:
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#### JCRS Acquisitions, 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:

#### Mr. James Sartori

(Name)

#### 6573 Marissa Loop #904

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Naples FL 34108

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.

(Signat<del>ure)</del>

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

# Delaware

PAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "JCRS ACQUISITIONS, LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE THIRTIETH DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

15 APR -2 AM 8:56

5701012 8300

150436570

AUTHENTICATION: 2248319

DATE: 03-30-15

You may verify this certificate online at corp.delaware.gov/authver.shtml