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(Requestor's Name)						
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(City/State/Zip/Phone #)						
, PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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Special Instructions to Filing Officer:						
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Office Use Only



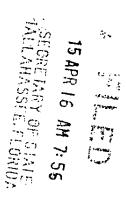


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04/16/15--01020--023 **55.00

01/29/15--01014--026 **70.00

04/16/15--01020--024 **638.75



A STANSIS APR 2 A 2015

COVER LETTER

TO:

TO:	Registration Section Division of Corporations							
SUBJECT: Juilleret Rental Properties, LLC Name of Limited Liability Company								
The en Exister	closed "Application by Fore	ign Limited Liability C to register the above re	Company for eferenced fo	Authorization to oreign limited lia	o Transa bility co	ct Business in Flor mpany to transact	ida," Certificate of ousiness in Florida	
Please	return all correspondence co	ncerning this matter to	the followi	ng:				
		James T. Ramer	Name of P	erson				
		Ramer, Moore, S	Schmoll & Firm/Com	k <u>Martin, PLI</u> pany	.C		_	
	100 Spring Street, P.O Box 5 Address							
	Harbor Springs, Michigan 49740 City/State and Zip Code							
		jramer@rmsml	aw.net	re annual report n	otification	1)		
For fur	ther information concerning	this matter, please call	:					
	James T. Ramer Name of	Contact Person	at (231)	526 Daytim	6-6214 e Telephone Number		
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Div Reg Clif 2 66	REET ADD ision of Cou istration Section Building I Executive ahassee, FL	porations ction g Center Circle				
Enclo	sed is a check for the fo ☐ \$125.00 Filing Fee	llowing amount: ☐ \$130.00 Filing Fee of Certificate of Status		55.00 Filing Fee ertified Copy	& D	\$160.00 Filing Fe of Status & Certi		



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 5, 2015

JAMES JUILLERET 993 ANN HARBOR SPRINGS, MI 49740

SUBJECT: JUILLERET RENTAL PROPERTIES LLC

Ref. Number: W15000008617

We have received your document for JUILLERET RENTAL PROPERTIES LLC and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The form you submitted is for a Foreign Profit, but your entity is a Foreign LLC. Please complete and return the enclosed blank form(s).

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The date first transacted business in Florida within the meaning of s. 607.1501 or 605.0905, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4) or 605.0904(7), F.S., this office is required to collect a civil penalty of \$1.000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Mel Solomon Regulatory Specialist II Supervisor

Letter Number: 115A00002441

LAW OFFICES

RAMER, MOORE, SCHMOLL & MARTIN

A PROFESSIONAL LIMITED LIABILITY COMPANY
FIRST COMMUNITY BANK BUILDING
ONE HUNDRED SPRING STREET
POST OFFICE BOX 5

HARBOR SPRINGS, MICHIGAN 49740-0005
INTERNET www.rmsmlaw.net

TELEPHONE (23)) 526-6214 TELEFAX (23)) 526-9343

* JAMES T RAMER

JOEL B. MOORE

FREDERICK L. SCHMOLL III

WEBB F. MARTIN

March 27, 2015

JAMES T. RAMER jramer@rmsmlaw.net

VIA: FedEx #8063 1341 5561
Mel Solomon, Regulatory Specialist II Supervisor
Florida Department of State
Division of Corporations - Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re:

Ref. #W15000008617 - Juilleret Rental Properties LLC

Dear Ms. Solomon:

Pursuant to your instructions and instructions from Neysa from the LLC Division, enclosed please find a copy of your letter dated February 5, 2015 along with the following completed documents for filing:

- 1. Cover Letter;
- 2. Application by Foreign Limited Liability Company, for Authorization to Transact Business in Florida;
- 3. Original Certificate of Existence;
- 4. Certificate of Designation of Registered Agent/Registered Office;
- 5. Check #2520 in the amount of \$638.75 for the \$500 penalty fee and the \$138.75 annual report filing fee; and,
- 6. Check #2521 in the amount of \$55 (\$125 less credit of \$70) for the filing fee.

Should you have any questions regarding the enclosed, please do not hesitate to call.

Thank you.

Very truly yours,

James T. Ramer

jlm V Enclosures xc: Client

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.	Jufferet Rental Properties, LLC	
_	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If n	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limit	ed
	oility Company," "L.L.C," or "L.L.C.")	
	27.4511210	
2	Michigan 3. 27-4511310 **Turisdiction under the law of which foreign limited liability (FEI number, if applicable)	
(1)	company is organized)	
4	January 27, 2014	
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5	993 Ann Street	
	Harbor Springs, Michigan 49740	
-	(Street Address of Principal Office)	
6	993 Ann Street	
	Harbor Springs, Michigan 49740	
-	(Mailing Address)	
	$\geq \omega$	
7.	The name, title or capacity and address of the person(s) who has/have authority to manage is/arecon	

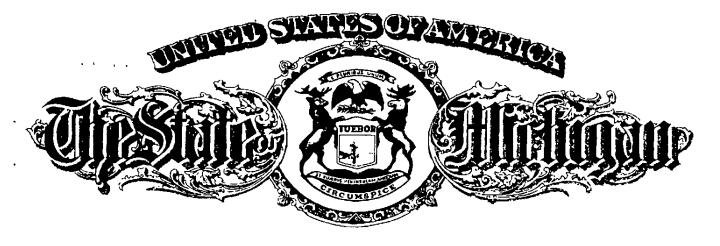
	James A. Juilleret, Manager	₽`Ę
	第3 あ 。	enderge. Seffigerje
	993 Ann Street	
		j
	Harbor Springs, Michigan 49740	en.
R A	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the offic	ial
	ring custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not	
	eptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translation	ator
	ist be submitted)	
11666	si oc suomitted)	
	James a Julleret	
	Signature of an authorized person	
	ecordance with section 605.4203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein ware 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.)	are true. I
	James A. Juilleret	
	Typed or printed name of signee	

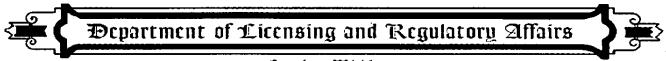
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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 Con	npany is:	
Juilleret Ren	ital Properties, LLC		
If unavailable, t	he alternate to be used in t	he state of Florida is:	
2. The name an	d the Florida street addres	s of the registered agent and office are:	
	Florida Deluxe Villa	s LLC	<u></u>
		(Name)	15 APR SECRET FALLAHA
	2926 Vineland Road	R 16	
	1 Tortus Street A	ddress (P.O. Box NOT ACCEPTABLE)	ر الماريخ
	Kissimmee,	FL 34746 City/State/Zip	# 7:5 6F 51A FF 10R
liability company registered agent statutes relating	y at the place designated in and agree to act in this ca to the proper and complete ations of my position as reg	d to accept service of process for the above this certificate, I hereby accept the appoin pacity. I further agree to comply with the performance of my duties, and I am family istered agent as provided for in Chapter 6. MANAGING MEMSEL)	ntment as provisions of all iar with and
	\$ 100.0 \$ 25.0		
	\$ 30.0		

\$ 5.00 Certificate of Status (optional)





Lansing, Michigan

This is to Certify That

JUILLERET RENTAL PROPERTIES, LLC

was validly organized on June 1, 2010 as a Limited Liability Company. Said Limited
Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and cred given it in every court and office within the United States.

13 APR 16 AM 7: 56

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 18th day of March, 2015

Alan J. Schefke, Director

Corporations, Securities & Commercial Licensing Bureau