M1500004465

(Requestor's Name)
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(Address)
(Address)
(City/State/Zip/Phone #)
(Otty/Otate/ZIp/Filloffe #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
- poirs bus stallages \$7775
CACH ENDER OPENO
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Office Use Only



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SECRETARY OF STATE

SECRETARY OF STATE DIVISION OF CORPORATION

ORPORATIONS
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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 13, 2015

KEVIN GREER 434 LAKE STREET, SUITE 200 EXCELSIOR, MN 55331

SUBJECT: SCFL PROPERTIES - ORLANDO, LLC

Ref. Number: W15000033862

We have received your document for SCFL PROPERTIES - ORLANDO, LLC and your check(s) totaling \$130.00. However, the document has not been filed and is being retained in this office for the following:

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$777.50.

Please return 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) 245-6051.

Stacey M Mason Regulatory Specialist II

Letter Number: 315A00010007

SECRETARY OF STATE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

COVER LETTER

O: Registration Section Division of Corporations				
SCFL PROPERTIES, LLC				
JBJECT: Name	of Limited Liability (Company		
he enclosed "Application by Foreign Limited Liability Coxistence, and check are submitted to register the above re	ompany for Authoriza eferenced foreign limit	ntion to Transact Business in Florida," C ted liability company to transact busines	ertific s in F	
ease return all correspondence concerning this matter to	the following:			
KEVIN GREER				
	Name of Person			
SCFL PROPERTIES, LLC				
	Firm/Company			
434 LAKE ST., SUITE 200				
	Address			
EXCELSIOR, MN 55331				
Cit	ty/State and Zip Code			
KMGCPA@AOL.COM				
E-mail address: (to be	used for future annual	report notification)		
or further information concerning this matter, please call:	:			
KEVIN GREER	612	802-9907		
Name of Contact Person	at (Area Code	_)		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		ETREET ADDRESS: Division of Corporations 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 Filir Certified Copy	ng Fee & \$160.00 Filing Copy of Status & Certified Copy of Status & FLORI	CORP	

SCIERCALION DI LO	IN FLORIDA		A BY/RATUA	~~ I D	قاسية بيانات
	TION 605 (902, FLORIDA STATUTES, THE FOLLOWI ISINESS IN THE STATE OF FLORIDA: J.L.C	ING IS SUBMITTED TO REGISTER A	FOREIGN	' ИМП	€D LIABILITY
(Name of Fore SCFL PROPERTIES - OR	ign Limited Liability Company; must include "Limi RLANDO, LLC	ted Liability Company," "L.L.C.," or	"LLC.")		_
(If name unavailable, enter all Liability Company," "L.L.C," MINNESOTA	ternate name adopted for the purpose of transacting or "LLC.") 46-275		me must in	clude "I	imited
2.	of which foreign limited liability	(FEI number, if applicable)		
4. 434 LAKE ST., SUITE	(Date first transacted business in Florida, if (See sections 605.0904 & 605.0905, F.S. to de 200	prior to registration.) termine penalty liability)	_		
EXCELSIOR, MN 553			- -		
6	(Street Address of Principal Office) 200		 -		
EXCELSIOR, MN 553					
7. Name and street address Name:	(Mailing Address) § of Florida registered agent: (P.O. Box NOT NORMA SAAB, SAAB REALTY GROUP, I	•			
Office Address:	605 BUTLER ST.				
	WINDEREMERE	34786 , Florida	_		
this application, I hereby	gistered agent and to accept service of process accept the appointment as registered agent an statutes relative to the proper and complete pe	d agree to act in this capacity. I	further a	gree to	comply
8. The name, title or capa KEVIN GREER, MANAG	(Registered agent's sign acity and address of the person(s) who has/have GER AND CFO		的 OF STA	-8 AM 3:	EILED ARY OF ST F CORPOR
434 LAKE ST., SUITE 20	00		- इति	59	ATIO
EXCELSIOR, MN 55331					⊼
	of existence, no more than 90 days old, duly au of which it is organized. (If the certificate is in a abmitted)				
	Signature of an authorized	l person	-		
	n 605.0203, F.S., the execution of this documen rue. I am aware that any false information subm				

degree felony as provided for in s.817.155, F.S.)

KEVIN GREER

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Steve Simon, 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:

SCFL PROPERTIES L. L. C.

Date Filed:

05/10/2013

File Number:

671939800027

Minnesota Statutes, Chapter:

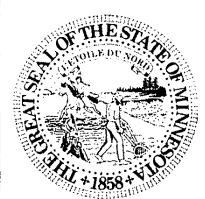
322B

Home Jurisdiction:

Minnesota

This certificate has been issued on:

05/01/2015



Ateve Pinnon Steve Simon

Secretary of State State of Minnesota