M15000050F2

| (Re | equestor's Name) | | | |
|---|--------------------|-------------|--|--|
| (Ad | ddress) | | | |
| (Ac | ddress) | | | |
| (Ci | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (B: | usiness Entity Nar | ne) | | |
| (De | ocument Number) | | | |
| Certified Copies | Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |

Office Use Only



000272594560

05/13/15--01025--009 **125.00



JUN 3 0 2015 J SHIVERS





June 16, 2015

SHERRY KOWALSKI 360 MORGAN LANE MILLINOCKET, ME 04462

SUBJECT: NUNICA, LLC Ref. Number: W15000035723

We have received your document for NUNICA, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return the corrected original and one copy of 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) 245-6051.

Letter Number: 415A00010639

Justin M Shivers Regulatory Specialist II Registration/Qualification Section



WOODWARD, PIRES & LOMBARDO, P.A.

ATTORNEYS AT LAW

CRAIG R. WOODWARD Board Certified: Real Estate

MARK J. WOODWARD Board Certified: Real Estate

ANTHONY P. PIRES, JR. Board Certified: City, County, and Local Government

J. CHRISTOPHER LOMBARDO Board Certified: Marital and Family Law

> ELEANOR W. TAFT Admitted to Rhode Is. Bar Of Counsel

ROBERT F. MURRELL Of Coursel

JENNIFER L. DEVRIES
JENNIFER M. TENNEY
LENORE T. BRAKEFIELD
MATTHEW P. FLORES
J. TODD MURRELL

REPLY TO:

 3200 TAMIAMI TRAIL N. SUITE 200
 NAPLES. FI. 34103
 239-649-6555
 239-649-7342 FAX

\$\frac{606}{606}\$ BALD EAGLE DRIVE SUITE 500 P.O. BOX ONE MARCO ISLAND, FL 34146 239-394-5161 239-642-6402 FAX

WWW.WPL-LEGAL.COM

May 12, 2015

Sent Via Federal Express Mail

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE: NUNICA, L.L.C.

Our firm represents Sherry Kowalski. Enclosed please find the following for registration of the above referenced foreign limited liability company:

- 1. Cover Letter.
- 2. Application by Foreign Limited Company for Authorization to Transact Business in Florida.
- 3. Authentication certificate from the State of Maine regarding Nunica, LLC
- 4. Check in the amount of \$125.00 for the fee.

Should you have any questions, please do not hesitate to contact our office.

Respectfully,

Lenore T. Brakefield, Esq.

Ibrakefield@wpl-legal.com

cc: Client

COVER LETTER

TO:

| TO: | | ation Section a of Corporation | 15 | | | | | |
|-----------------------|------------------------------------|---|--|--|--|---|-------------------------------|--|
| SUBJEC | CT: | Nunica, L.L.C. | | | | | | |
| | ~ · · · · · · · · | Name of Limited Liability Company | | | | | | |
| The encl Existence | losed "A _l e, and ch | oplication by For eck are submitte | eign Limited Liability Comp d to register the above refer | oany for Authoriza enced foreign limi | ation to Tra ted liability | nsact Business in Florida," Coy company to transact busines | ertificate of s in Florida | |
| Please re | eturn ail d | correspondence c | oncerning this matter to the | following: | | | | |
| | | Sherry Kowalsi | ki | | | | | |
| | | | N | ame of Person | | | | |
| | Nunica, L.L.C. | | | | | | | |
| | | | Firm/Company | | | | | |
| | | 360 Morgan La | ne | | | | | |
| | | | | Address | | | | |
| | | Millinocket, Ma | nin e 04462 | | | | | |
| | | | City/Si | late and Zip Code | | | | |
| | S | kowalski@myfa | irpoint.net | | | | | |
| | - | | E-mail address: (to be used | for future annual | report not | ification) | | |
| For furth | er inform | nation concerning | this matter, please call: | | | | | |
| | Sherry I | Kowalski | | 207 | 723-696 | 54 | | |
| | | Name o | Contact Person | Area Code | Dayı | time Telephone Number | | |
|] | Division Registrat P.O. Box | of Corporations ion Section 6327 see, FL 32314 | | | Division of Registration Clifton Bu 2661 Exec | ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301 | | |
| | | k for the followi 00 Filing Fee | ng amount: ☐ \$130.00 Filing Fee & Certificate of Status | ☐ \$155.00 Filin Certified Copy | ıg Fee & | ☐ \$160.00 Filing Fee, Certified Status & Certified Copy | ficate | |

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. Nunica, L.L.C. | | | | | | | | _ |
|--|---|-------------------|--------------------|---------------------------------------|------------------|--------------|---------------------|-------------------|
| (Name of Fore | eign Limited Liability Company; mus | t inclu | de "Limited Lial | bility Company. | ," "L.L.C.," or | "LLC.") | | - |
| (If name unavailable, enter al Liability Company," "L.L.C, | Itemate name adopted for the purpose " or "LLC.") | of tra | nsacting busines | s in Florida. Th | e alternate nam | ne must incl | ude "Lin | - nited |
| Maine | | 3. | 20-0842635 | | | | | |
| | of which foreign limited liability | ٥. | | (FEI number | , if applicable) | | | • |
| April 29, 2015 | | | | | | | | |
| | (Date first transacted busines (See sections 605.0904 & 605.1 | ss in F | orida, if prior to | registration.) | v) | • | | |
| 360 Morgan Lane | (200 3001012 005.050 1 22 005. | | | ponuny naom | .37 | _ | | |
| Millinocket, Maine 04 | 1462 | | | | | | | |
| | (Street Address of P | rincipa | ol Office) | | | - | | |
| j | | | | | | - | | |
| same | (Mailing A | ddress | 3) | | | • | | |
| . Name and street addres | s of Florida registered agent: (P.0 | D. Bo | NOT accepta | able) | | | | |
| Name: | Lenore T. Brakefield, Esquire | | | · | | | | |
| Office Address: | 606 Bald Eagle Drive, Suite 500 |) | ·- | - | | | | |
| | Marco Island | | | , Florida 34 | 145 | | | |
| Registered agent's accept | (City) | | | · · · · · · · · · · · · · · · · · · · | (Zip code) | • | | |
| his application, I hereby (| Genore) | ered a comp | gent and agree | to act in this | capacity. If | urther āgi | ee to co | mply accep |
| 8. The name, title or capa | city and address of the person(s) | who h | as/have authori | ity to manage | is/are: | TEO. | ם. נס | - |
| Sherry Kowalski, Manage | | | | • | | | - X | |
| | | | | | | 25 | 5 | |
| | · · · · · · · · · · · · · · · · · · · | | | | | 22 | ₩, | |
| | · · · · · · · · · · · · · · · · · · · | | | | | | | |
| Attached is a certificate urisdiction under the law of the translator must be su | of existence, no more than 90 day of which it is organized. (If the cerbmitted) | s old, rtifica | te is in a foreig | n language, a | translation of | the certific | records cate und | in the ler oat |
| V | Signature of | fan n | uthorized person | lshi | Man | ager | | |
| | 5.8741016.0 | 11 141 | | | | | | |

(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. I 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.)

Sherry L. Kowalski, Manager
Typed or printed name of signee

State of Maine



Department of the Secretary of State

I, the Secretary of State of Maine, certify that according to the provisions of the Constitution and Laws of the State of Maine, the Department of the Secretary of State is the legal custodian of the Great Seal of the State of Maine which is hereunto affixed and of the reports of formation, amendment and cancellation of articles of organization of limited liability companies and annual reports filed by the same.

I further certify that NUNICA, LLC is a duly formed limited liability company under the laws of the State of Maine and that the date of formation is February 18, 2004.

I further certify that said limited liability company has filed annual reports due to this Department, and that no action is now pending by or on behalf of the State of Maine to forfeit the articles of organization and that according to the records in the Department of the Secretary of State, said limited liability company is a legally existing limited liability company in good standing under the laws of the State of Maine at the present time.

In testimony whereof, I have caused the Great Seal of the State of Maine to be hereunto affixed. Given under my hand at Augusta, Maine, this twenty-fourth day of June 2015.



Matthew Dunlap Secretary of State FLORID