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TALLAHASSEE, FLORIDA

2015 SEP -4 P 2:49

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S MASON

BURNS

LAW OFFICES

1001 W. Glen Oaks Lane, Suite 227
Mequon, WI 53092-3368

www.burnslaw.com

Additional office in Brookfield, WI phl 262-240-9904 fax 262-240-9945 email firm@burnslaw.com

August 28, 2015

Florida Department of State
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:


Enclosed for filing with your office is an application for registration of VILLAS ON THE GREEN 301, LLC as a foreign limited liability company. We have enclosed the following relating to this registration:

1. Cover letter (in the form prescribed);
2. Application For Foreign Limited Liability Company For Authorization To Transact Business In Florida, signed by the Company's Florida Registered Agent and the Company's sole Member/Manager;
3. A Certificate of Status from the Wisconsin Department of Financial Institutions, dated August 26, 2015; and
4. A check made payable to the Florida Department of State in the amount of \$130.00 to cover (i) the Application Filing Fee (\$100), (ii) Designation of Registered Agent (\$25), and (iii) Certificate of Status (\$5).

Please file these at your earliest convenience and return confirmation of registration and the Certificate of Status once filed. If you have any questions relating to this application or the registration of this limited liability company, please feel free to contact us at the Mequon address provided above or by e-mail to sburns@burnslaw.com. Thank you very much for your assistance with this registration.

Sincerely yours,

BURNS LAW OFFICES, S.C.



Scott G. Burns

Enclosure

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: VILLAS ON THE GREEN 301, 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 concerning this matter to the following:

JULIA ILYASOVA

Name of Person

Firm/Company

11611 CANTERBERRY LANE

Address

MEQUON, WI 53092

City/State and Zip Code

juliiailyasova@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SCOTT G. BURNS

262

240-9904

at (_____) _____

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET 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 Filing Fee &
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:

1. VILLAS ON THE GREEN 301, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

VILLAS OTG 301, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. WISCONSIN

(Jurisdiction under the law of which foreign limited liability company is organized)

3. _____

(FEI number, if applicable)

4. _____

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 11611 CANTERBERRY LANE

MEQUON, WI 53092

(Street Address of Principal Office)

6. SAME AS STREET ADDRESS

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: KEVIN KENT

Office Address: 303 ALICANTE DRIVE

JUNO BEACH

(City)

, Florida 33408

(Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

JULIA ILYASOVA, SOLE MEMBER AND MANAGER

11611 CANTERBERRY LANE

MEQUON, WI 53092

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)


Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

JULIA ILYASOVA

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 SEP -4 P 2:49

FILED

United States of America

State of Wisconsin

DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



To All to Whom These Presents Shall Come, Greeting:

I, GEORGE PETAK, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

VILLAS ON THE GREEN 301, 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 July 28, 2015.

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 August 26, 2015.

A handwritten signature in cursive script that reads "George Petak".

GEORGE PETAK, Administrator
Division of Corporate and Consumer Services
Department of Financial Institutions



DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: <http://www.wdfi.org/apps/ccs/verify/>

Enter this code: **160968-F5EB6B94**