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# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H15000238069 3)))



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To:

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850) 205-8842 Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

Foreign Limited Liability Company

MarBarThom, LLC Certificate of Status 0 Certified Copy 0 Page Count 04 \$125.00 Estimated Charge

OCT 0 6 2015

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### COVER LETTER

TO:	Registration Section Division of Corporati	ons			
SUBJE	MarBarThom, LL	с			
		Name of	Limited Liability C	ompany	
The end Existent	closed "Application by Fi ce, and check are submit	oreign Limited Liability Com ted to register the above refer	pany for Authorizat enced foreign limite	ion to Tre d liabilit	ansact Business in Florida," Certificate y company to transact business in Flor
Picase r	cturn all correspondence	concerning this matter to the	following:		
	J. Steven Tike	alsky			
		N	ame of Person		
	Rassech & Ti	katsky, S.C.			
		F	inn/Company		
	300 Wisconsi	n Avenue, Suite 200			
		<del></del>	Address		
	Waukesha, W	1 53186			
		City/8	tate and 21p Code	•	
	tikalsky@laww	aukesha.com			
	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	E-mail address: (to be use	d for future annual	eport no	lification)
For furth	ner information concerni	ng this matter, please call:			
	J. Steven Tikalsky		262 at (	547-05	55
	Name	of Contact Person	Area Code	Day	time Telephone Number
	MAILING ADDRESS Division of Corporation			Division	ADDRESS: of Corporations
	Registration Section P.O. Box 6327			Registrat Clifton B	lon Saction wilding
	Tallahassee, FL 32314			2661 Exc	ecutive Center Circle see, PL 32301
	d is a check for the follow		m p166 06 897-	. Pec A	Carlo de Vilina Van Carlifforia
	■ \$125,00 Filing Pee	☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Certified Copy	g rec ot	☐ \$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 POLLOWING IS SUBMITTED TO RECISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS INTIME STATE OF FLORIDA:

(remite of Lot	mine Timera I Labilla, Phi		
	color control that any company; must	include "Limited Liability Company," "LLC.," or "LLC	Z.'')
(If name unavailable, enter a Liability Company," "L.L.C.	ilternate name adopted for the purpose of "or "LLC.")	of transacting business in Florida. The alternate name ma	est include "Limited
2. Wisconsin		3. 47-5156741	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4. November 1, 2015			
,	(Date first transacted business (See appellons 605,0904 & 605,09	in Florida, if prior to registration.) 905, F.S. to determine penalty liability)	
5. 300 Wisconsin Avenu		, rest to account parally manning,	
Waukesha, WI 53186			
300 Wisconsin Avenue	(Street Address of Pri	ncipal Office)	
v·	<del></del>		
Waukesha, WI 53186			
	(Mailing Ad	(tress)	± = ⊆
<ol> <li>Name and street address</li> </ol>	s of Florida registered agent: (P.O.	. Box NOT acceptable)	
Name:	C T Corporation System		
Office Address:	1200 South Pine Island Road		
	Plantation	, Florida 33324	
	(City)	(Zip code)	1(3)
designated in this applical ocomply with the provision comply with the provision of the obligations of the control of the cont	gistered agent and to accept servic don, I hereby accept the appointm has of all statutes relative to the pri to position as revistered agent.	e of process for the above stated limited liability c ent as registered agent and agree to act in this cap oper and complete performance of my duties, and	sucity. I further agn
Having been named as rej lesignated in this applicat o complywith the provisio tocapt the obligations of n	gistered agent and to accept servicition, I hereby accept the appointment of all statutes relative to the proposition as registered agent.  C T Corporation Syst.  (Registered	e of process for the above stated limited liability cent as registered agent and agree to act in this cap oper and complete performance of my duties, and lean formation and liability contains a partie of my duties are liable.	sucity. I further agn
Having been named as rejection to the supplication of the provision of the obligations of notices. The name, title or capto	gistered agent and to accept servicition, I hereby accept the appointment of all statutes relative to the proposition as registered agent.  C T Corporation Syst.  (Registered	e of process for the above stated limited liability c ent as registered agent and agree to act in this cap oper and complete performance of my duties, and	sucity. I further agn
Having been named as rej lesignated in this applicat o complywith the provisio accept the obligations of n	gistered agent and to accept servicition, I hereby accept the appointment of all statutes relative to the proposition as registered agent.  C T Corporation Syst  (Registers city and address of the person(s) with	e of process for the above stated limited liability cent as registered agent and agree to act in this cap oper and complete performance of my duties, and lean formation and liability contains a partie of my duties are liable.	sucity. I further agn
Having been named as rejectioning the supplication of comply with the provision occups the obligations of not supplied the name, title or captall. Steven Tikelsky  Authorized Per	gistered agent and to accept serviciton, I hereby accept the appointment of all statutes relative to the print position as registered agent.  C T Corporation Syst  (Registered agent agent)  (Registered agent)	e of process for the above stated limited liability cent as registered agent and agree to act in this cap oper and complete performance of my duties, and lean formation and liability contains a partie of my duties are liable.	sucity. I further agn
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Having been named as replesignated in this application comply with the provision recept the obligations of it.  8. The name, title or capacity. Steven Tikelsky.  Authorized Per 300 Wisconsin  1. Attached is a certificate our indication under the law of the translator must be sufficient to the indication of the translator must be sufficient of	gistered agent and to accept servicition, I hereby accept the appointment of all statutes relative to the property position as registered agent.  By:  (Registered and address of the person(s) with the person of existence, no more than 90 days of which it is organized. (If the certification)  Signulare of in accordance with section 605,026	te of process for the above stated limited liability of ent as registered agent and agree to act in this cap oper and complete performance of my duties, and tem Jerus Uron Janiter Vincent Vice Position & Assessment See to has/have authority to manage is/are:  Waukesha, WI 53186  old, duly authenticated by the official having custo ifficate is in a foreign language, a translation of the confidence of the c	dy of records in the certificate under oath

# 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:

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

## MARBARTHOM, 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 September 18, 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 October 02, 2015.

A VIII OF WILES

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:

163398-88ACB871