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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:					
James Daemicke GAVE					
CORRECT name of LLC					
DATE 11716					
DATE 1716 DOC. EXAM 17+					

Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporations					
CHRI	THIRD COAST ICE CREAM PARTNER, LLC					
SUDJ.	Name of Limited Liability Company					
The er Existe	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of ace, 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:					
	JAMES DAEMICKE, CPA					
	Name of Person					
	DAEMICKE FINANCIAL GROUP					
	Firm/Company					
	7250 W. COLLEGE DR., #ISE					
	Address					
	PALOS HEIGHTS, IL 60463					
	City/State and Zip Code					
	JIM@DAEMICKE.COM					
	E-mail address: (to be used for future annual report notification)					
For fu	ther information concerning this matter, please call:					
	JAMES DAEMICKE, CPA 708 361-2800 at (
	Name of Contact Person Area Code Daytime Telephone Number					
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FI. 32301					
Enclo	red is a check for the following amount: \$\Boxed{1} \\$125.00 \text{ Filing Fee} \Boxed{1} \\$130.00 \text{ Filing Fee} \& \Boxed{1} \\$155.00 \text{ Filing Fee} \& \Boxed{1} \\$160.00 \text{ Filing Fee, Certificate of Status} \\ \text{Certified Copy} \text{of Status & Certified Copy} \text{of Status & Certified Copy} \text{of Status & Certified Copy} \text{of Status & Certified Copy} \text{of Status & Certified Copy} \text{of Status & Certified Copy} \text{of Status & Certified Copy} \text{of Status & Certified Copy} \text{of Status & Certified Copy} \text{of Status & Certified Copy} \q					



FLORIDA DEPARTMENT OF STATE Division of Corporations

2016 JAN - 7 AM 11: 44

SECRETARY OF STATE
TALLAHAS SEE, FLORIDA

December 11, 2015

JAMES DAEMICKE DAEMICKE FINANCIAL GROUP 7250 W COLLEGE DR #1SE PALOS HEIGHTS, IL 60463

SUBJECT: THIRD COAST ICE CREAM PARTNER LLC

Ref. Number: W15000080085

We have received your document for THIRD COAST ICE CREAM PARTNER 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):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 715A00026034



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:

Liability Company," "L.L.C,	Iternate name adopted for the purpose of transacting I " or "LLC.")	ousiness in Florida. The alternate nam	ie must include	"Limited	
2. ILLINOIS	3. 36-4350				
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)			
4. N/A					
5. 5064 ANNUNCIATIO	(Date first transacted business in Florida, if g (See sections 605.0904 & 605.0905, F.S. to de ON CIRCLE, #206	prior to registration.) termine penalty liability)	-		
AVE MARIA, FL 3414					
	(Street Address of Principal Office)				
6. <u>5064 ANNUNCIATIO</u>	N CIRCLE, #206		_ 골뉴 [er e er
AVE MARIA, FL 341	42		- E	· 	i
·	(Mailing Address)		- 5/5/		MITUS MITUS
7. Name and street addres	ss of Florida registered agent: (P.O. Box NOT)	accentable)		1 ∄	
	CHRISTOPHER HEITMANN				1:
Name:		_ 	25 25 25 25	ς.s `,	
Office Address:	5064 ANNUNCIATION CIRCLE, #206		튛즱	0,1	
	AVE MARIA	, Florida 34142	_		
Registered agent's accep	(City)	(Zip code)			
designated in this applica	gistered agent and to accept service of process tion, I hereby accept the appointment as regist ons of all statutes relative to the proper and com my position as registered agent	ered agent and agree to act in thi:	is capacity. I j	further a	gree
to complywith the provisi accept the obligations of t	(Registered agent's sign	•			
to complywith the provisions of accept the obligations of a	acity and address of the person(s) who has/have	authority to manage is/are:			
to complywith the provision accept the obligations of the obligations of the control of the cont	acity and address of the person(s) who has/have ANN, MEMBER	•			
to complywith the provisi accept the obligations of t	acity and address of the person(s) who has/have ANN, MEMBER	authority to manage is/are:			

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.

CHRISTOPHER HE	TMANN	
T T T T T T T T T T T T T T T T T T T	Typed or printed name of signee	, , , , , , , , , , , , , , , , , , , ,



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of

Business Services. I certify that

THIRD COAST ICE CREAM PARTNER LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MARCH 17, 2000, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Scal of the State of Illinois, this 2ND day of DECEMBER A.D. 2015 .

Authentication #: 1533602560 verifiable until 12/02/2016
Authenticate at. http://www.cyberdriveillinois.com

Desse White