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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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 Stens Specialty Brands, LLC

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K. SALY DEC 23 2016

COVER-LETTER

TO:	Registration Séction Division of Curporations.						
SURI	Stens Specialty Brands, LLC						
172,000	Name of Limited Elability Company	 ·					
The en	nclosed "Application by Foreign Limited Limbility Company for Authorization to Transact Business in Florince, and check are submitted to register the above referenced foreign limited liability company to transact b	da," Certificate of usiness in Florida					
Picase	return all correspondence concerning this matter to the following:						
	James Beukelman						
Name of Person							
Arrowhead Electrical Products, Inc.							
Firin/Company							
3787 95th Ave. NE							
Addiess							
Blaine, MN 55014							
City/State and Zip.Code							
jbeukelman@arrowheadep.com							
E-mail address: (10 be used for future annual report notification)							
For fu	erther information, concerning this matter, please call;						
	Michael Martis at £ 216 , 586-7512						
	Name of Confact Person Area Code Daytime Telephone Numb	àr:					
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahasseo, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301						
Enclo	Sed is a check for the following amount: \$\Begin{align*} \Boxed{\text{ Status Received Copy}} &						

APPLICATION BY FOREIGN-LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SEC COMPLIANT TO TRANSACT BU	TION 605.0902, FLORIDA STATUTES, TI ISINESS IN THE STATE OF FLORIDA:	HE FOLLOWING IS SUBMITT.	ED TO RECUSTER A	FOREIGN TAMEETE LIABILITY
Stens Specially Brands				
Name of Bare	ign Limited Ludbility Company: must i	nclude "Lin:!ted Liability Con	npany," "L.L.C.," or	·'LL(C.")
4.27	and the state of t		····	radical Apparaturative and reacher them are are arrestation or the second of the secon
(If name unavailable, enter all Lisbility Company," LLC,	ternate name adopted for the purpose of "DLC,").	f transacting business in Flori	da. The alternate has	ne must heliade "Limited
2. Wisconsin	•	3. 39-1832331		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(EELn	umber, if applicable)
4,	(Date first transacted business	in Florida, it prior to registrati	ion.)	
2707 064 4 318	(Date first transacted business (See sections 605.0904 & 605.09	05, P.S. to determine penalty	liability)	
5. 3787 95th Avenue NE	, Braine, 1919 55014			MODEC 22 H
				到らこ
hada sirali an inno anto	(Street Address of Prin	_	And the second s	THE PARTY OF THE P
6. 3787 95th Avenue NE.	Blaine, MN 55014			THO TO
				75
	(Mailing Ad	lress)		第三 2
7. Name and street address	g of Florida registered agent: (P.O.	Box NOT acceptable)		
Name:	CT Corporation System	خادمانان وبيديدة السندنانية ويوديد		•
Office Address:	1200 South Pine Island Road			
	Plantation,	Floric	33324	
Registered agent's accep	(City)		(Zip code)	~ ·
Having been named as re designated in this applica to complywith the provisi	gistered agent and to accept service tion, I hereby accept the appointm ons of all statutes relative to the pr my position as registered agent, CT Corporation Syst By:	ent as registered agent and oper and complete perform em KML Bol	d agree to act in th	ils capacity. I further agree s, and I am familiar with and
	•	d.ugent's signature)		
	ncity and address of the person(E) w			
	ger, 50 Public Square 29th Floor, C			
3333 Lee Parkway Suite	700, Dailas, TX 75219; Steven Stub	itz, Manager, 227 Carringo	Tr., Barrington, I	L 60610;
James Wisnoski, Manage	r, 9545 209th St., Lakeville, MN 55	044; See additional page		
	of existence, no more than 90 days of which it is organized. (If the cert ubmitted)			
	Signature of	in uniforized person		www.w
	I in accordance with section 605.020 the Department of State constitute			
		loberts, Manager		
•	Typed or pri	nted name of signee		.,=

19542080845

FILED

2016 DEC 22 AMII: 23

TALLAHASSEE, FLORIOR

8. Additional person with authority to manage:

, Eric Nowlin, Manager 3787 95th Ave. NE Blaine, MN 55014

DOM 180 181 183

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, David J. Duecker, Deputy Administrator, Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

STENS SPECIALTY BRANDS, 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 October 10, 1995.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120, Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on December 21, 2016.

DAVID J. DUECKER, Deputy Administrator Division of Corporate and Consumer Services Department of Financial Institutions

BY: