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FLORIDA DEPARTMENT OF STATE Division of Corporations

April 3, 2017

PETER J FUCHSTEINER LAW OFFICE OF PETER J. FUCHSTEINER 366 SOUTH TENTH AVE. WAITE PARK, MN 56387

SUBJECT: SAND CAPER 306, LLC Ref. Number: W17000027896

We have received your document for SAND CAPER 306, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 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.

Karen A Saly Regulatory Specialist II

Letter Number: 217A00006312

COVER LETTER

TO:

TO:	Registration Section Division of Corporatio	ns					
cunt	COT	Sand Cap	er 306, LLC				
20BJI	VBJECT:Name of Limited Liability Company						
The en Exister	closed "Application by Fonce, and check are submitted	reign Limited Liability Comp ed to register the above refere	pany for Authoriza enced foreign limi	ation to Tra ted liability	ansact Business in Florida," Ce y company to transact business	ertificate of in Florida	
Please	return all correspondence	concerning this matter to the	following:				
		Peter	J. Fuchsteiner				
		N	ame of Person				
		Law Offi	ice of Peter J. Fuc	hsteiner			
	Firm/Company						
	366 South Tenth Ave.						
	Address						
		Waite	Park, MN 56387				
	-	City/S	tate and Zip Code				
		LMSand@	SandCompanies.c	om			
		E-mail address: (to be used	d for future annua	report no	tification)		
For fur	ther information concerning	ng this matter, please call:					
	Peter J. Fuchste	einer	320 at (293-			
	Name	of Contact Person	Area Code	Day	time Telephone Number		
	MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exc	of Corporations ion Section duilding ecutive Center Circle see, FL 32301		
Enclos	ed is a check for the follow ☐ \$125.00 Filing Fee	ving amount: \$\forall \$130.00 \text{ Filing Fee & Certificate of Status}	□ \$155.00 Fili Certified Copy		☐ \$160.00 Filing Fee, Certi of 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. Sand Caper 306, LLC

ii name unavanane, emer an .iability Company," "L.L.C,"	temate name adopted for the purpose of transaction "LLC.")	cting business in Florida. The alternate nan	ne must include "Limited
Minnesota	3. N	// A	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	,
N/A			
	(Date first transacted business in Flori (See sections 605.0904 & 605.0905, F.S.	da, if prior to registration.)	•••
366 South Tenth Ave.	Waite Park, MN 56387		_ <u>~</u>
			MILAPR 18 PH 4: 46 SECRETARY OF STATE TALLAHASSEE, FLORID
	(Street Address of Principal C		一篇第二
366 South Tenth Ave.	Waite Park, MN 56387		- PSE TO 1
			SEY B
	(Mailing Address)		FLIST
'. Name and street addres	ss of Florida registered agent: (P,O, Box]	NOT acceptable)	記ま
Name:	Thomas Shelly		D.
Office Address:	3831 Tyrone Boulevard North, Suite 200	0	
	St Petersburg, FL	Florida 33709	
	(City)	, Florida 33709 (Zip code)	_
lesignated in this applica to complywith the provisi	egistered agent and to accept service of protion, I hereby accept the appointment as ons of all statutes relative to the proper almy position as registered agent.	registered agent and agree to act in th and complete performance of my dutie MM	is capacity. I further agre
	(Registered agent	t's signature) /	
	acity and address of the person(s) who has	/have authority to manage is/are:	
8. The name, title or capa	Card Decarding Inc		
8. The name, title or cape Leo M. Sand, CEO of Ma	inager, Sand Properties, Inc.		
•	mager, Sand Properties, Inc.		
•	mager, Sand Properties, Inc.		

Peter J. Fuchsteiner, Attorney for Sand Caper 306, LLC

Typed or printed name of signee

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:

Sand Caper 306, LLC

Date Filed:

02/27/2017

File Number:

936910900027

Minnesota Statutes, Chapter:

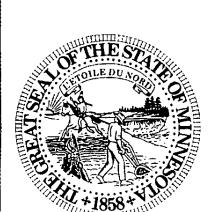
322C

Home Jurisdiction:

Minnesota

This certificate has been issued on:

04/12/2017



Oteve Vimm

Steve Simon

Secretary of State State of Minnesota