

M17000003735

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

1 WIN-16162

Office Use Only



200295409192

02/21/17--01021--014 \*\*130.00

17 MAY -1 0110:16

FILED

O SIMMONS  
MAY 03 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 30, 2017

CAROL BODNAR \*\*\*CORRECTION\*\*  
275 INDIES WAY, #1604  
NAPLES, FL 34110

SUBJECT: LAKESHORE MANAGEMENT LLC  
Ref. Number: W17000016162

We have received your document for LAKESHORE MANAGEMENT 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):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer 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.

Octavia I Simmons  
Regulatory Specialist II

Letter Number: 817A00003594

RECEIVED

2017 MAY -1 PM 12:10

TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2017 MAR 28 PM 2:11

February 23, 2017

CAROL BODNAR  
257 INDIES WAY, #1604  
NAPLES, FL 34110

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Ref. Number: W17000016162

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Octavia I Simmons  
Regulatory Specialist II

Letter Number: 817A00003594

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Lakeshore Management 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:

Carol Bodnar

\_\_\_\_\_  
Name of Person

Lakeshore Management LLC

\_\_\_\_\_  
Firm/Company

275 Indies Way #1604

\_\_\_\_\_  
Address

Naples, FL 34110

\_\_\_\_\_  
City/State and Zip Code

carol@lakeshoremgmt.com

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

For further information concerning this matter, please call:

Carol Bodnar

216

832-5090

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. Lakeshore Management LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")  
Lakeshore Management of Ohio 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. Ohio  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 34-1927414  
(FEI number, if applicable)
4. March 15, 2017  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 275 Indies Way #1604  
Naples, FL 34110  
(Street Address of Principal Office)
6. \_\_\_\_\_  
(Mailing Address)
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
- Name: Carol Bodnar
- Office Address: 275 Indies Way #1604  
Naples, Florida 34110  
(City) (Zip code)

**Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated limited liability company 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.*

Carol Bodnar

(Registered agent's signature)

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

Carol G. Bodnar, member LLC, 275 Indies Wat #1604, Naples, FL 34110

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)

Carol G. Bodnar

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.

Carol G. Bodnar

Typed or printed name of signee

17 MAY -1 AM 10:19  
FILED

UNITED STATES OF AMERICA  
STATE OF OHIO  
OFFICE OF THE SECRETARY OF STATE

*I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show LAKESHORE MANAGEMENT LLC, an Ohio Limited Liability Company, Registration Number 1161961, was organized within the State of Ohio on June 16, 2000, is currently in FULL FORCE AND EFFECT upon the records of this office.*



*Witness my hand and the seal of the  
Secretary of State at Columbus, Ohio  
this 14th day of February, A.D. 2017.*

*Jon Husted*

Ohio Secretary of State

Validation Number: 201704503540