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Foreign Limited Liability Company GEC MODELLO II, LLC

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COVER LETTER

TO:	Registration Section Division of Corporation	ns				
\$UBJ1	ECT:					
		Name of	Limited Liability Company			
The en Exister	closed "Application by Fonce, and check are submitt	reign Limited Liability Compedition to register the above reference to register the above reference.	pany for Authorization to Trended foreign limited liabili	ransact Business in Floric ty company to transact bu	da," Certificate of usiness in Florida	
Please	return all correspondence	concerning this matter to the	following:			
		N	ame of Person			
	Firm/Company					
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	SECH SECH					711
	City/State and Zip Code				JUN 1	F
	-	P. mail address! (to be use	d for future annual report no	- Carallan	2 - SEE	m
		•	a tor tature annual report ne	ouncation)	当気の	
For fur	ther information concerning	ng this matter, please call:			ORID ORID	
	Name	of Contact Person	at () Area Code De	sytime Telephone Numbe	ж Э	
	MAILING ADDRESS Division of Corporation			T ADDRESS:		
	Registration Section	ons Division of Corporations Registration Section				
	P.O. Box 6327 Tallahassee, FL 32314			Building cecutive Center Circle ssee, FL 32301		
Enclose	ed is a check for the follow	ving amount:				
	□ \$125.00 Filing Fce	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee of Status & Certified		

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

	SIMENS IN THE STATE OF FLORIDA	OLDMAN BROWN HS. TO REASTER A	
I. GEC MODELLO II, LI		de "Limited Liability Company," "L.L.C.," or "	CLC.")
(If name unavailable, enter al Liability Company,* "L.L.C."		nsacting business in Plorida The alternate name	must include "Limited
Wisconsin	,	82-1207582	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4	(Date first transacted business in F	lorida if prior to registration.)	
	(See sections 605.0904 & 605.0905,	P.S. to determine penalty liability)	
5. 200 N. Main Street			ZEII SEC
Oregon, WI 53575			CO
	(Street Address of Princip	al Office)	JUN SRETI AHA
6. 200 N. Main Street			12 ARY SSE
Orogon, W1 53575			E C
Orogon, W1 33373	(Mailing Addres	3)	THE TO
* - \$7 d d d			7. S. S. 7.
/. Name and street addres	s of Florida registered agent: (P.O. Bo	x NOT acceptable)	
Name:	CT CORPORATION		≫
Office Address.	1200 S. Pine Island Road, Suite 250		
	Plantation,	, Florida 33324 (Zip code)	_
	(City)	(Zip code)	
designated in this applica to complywith the provisi	tion. I hereby accept the appointment	f process for the above stated limited liabil as registered agent and agree to act in this rand complete performance of my duties. Judith Arga Vice Preside	s capacity. I further agres , and I am familiar with and O mt
	(Registered	gent's signature)	
% The name, title or caps	acity and address of the person(s) who	has/have authority to manage is/are:	
	ate Secretary of Gorman & Company,		
200 N. Main St.			
Oregon, WI 53575			
Oragon, Wrosevo			
9. Attached is a certificate jurisdiction under the law of the translator must be s	of which it is organized. (If the certific	i, duly authenticated by the official having late is in a foreign language, a translation o	custody of records in the fthe certificate under oath
	Chines S. alex	authorized person	_
	Signature of an	authorized person (
This document is executed submitted in a document to	the Department of State constitutes a	(1) (b), Florida Statutes. I am aware that an third degree folony as provided for in s.B17	y false information 7.155, P.S.
	JOYCE WHETEICH		_
	Typed or printer	I name of signee	

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, Mary Ann McCoshen, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

GEC MODELLO II. 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 April 12, 2017.

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 June 07, 2017.

MARY ANN MCCOSHEN, 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:

201513-783A5388