

M/7000005865

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

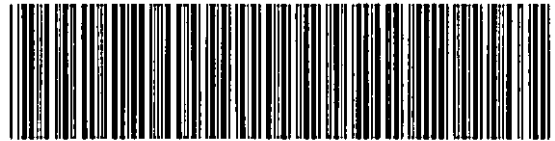
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

10/7/21
TM

Office Use Only



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06/30/21--01017--013 **60.00

21 AUG 30 PM 3:05



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 22, 2021

JAN CUMMINGS
2900 LONE OAK PARKWAY STE 140A
EAGAN, MN 55121

SUBJECT: FLORIDA TAMPA HOLDINGS II, LLC
Ref. Number: M17000005865

** See new
attached!*

We have received your document for FLORIDA TAMPA HOLDINGS II, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LLC, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

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) 245-6050.

Tekayla T Matthews
OPS

Letter Number: 121A00017108

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Florida Tampa Holdings II, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jan Cummings

Name of Person

Gopher Resource, LLC

Firm/Company

2900 Lone Oak Parkway, Suite 140A

Address

Eagan, MN 55121

City/State and Zip Code

jan.cummings@gopherresource.com

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

For further information concerning this matter, please call:

Jan Cummings

Name of Person

at (651) 405-2238

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|--|---|--|--|

21 AUG 60 PM 3:05

State: FLORIDA TAMPA HOLDINGS II, LLC

MUST BE A STREET ADDRESS)

MAY BE A POST OFFICE BOX)

4. Date authorized to do business in Florida: 7/7/17

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.022(1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Signature of a member or authorized representative of a member

Brian Leen

Typed or printed name of signer

Filing Fee: \$25.00