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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Fhone : (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.\*\*

ಪ್ರತಿil Address:\_\_\_

## Foreign Limited Liability Company Continental 406 Fund LLC

Certificate of Status	0
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Page Count	05
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### **FAX COVER SHEET**

ТО		
COMPANY		<u>.                                  </u>
FAXNUMBER	18506176383	
FROM	Ranae McGraw	
DATE	2017-07-21 15:01:17 CST	
RE	Continental 406 Fund LLC	

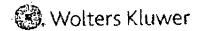
#### **COVER MESSAGE**

Tyler Theis
Associate Fulfillment Specialist
Global Fulfillment Team
CT Corporation

Office (614) 280-3338

<u>Tyler.Theis@wolterskluwer.com</u>

<u>GlobalFulfillmentTeam@wolterskluwer.com</u>



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#### COVER LETTER

TO:	Registration Section Division of Corporation	18	13 7.2			
e410 f1	Continental 406 Fur					
SUBJE	sc1:	Name of	Limited Liability (	Lompany	-	
The en Exister	closed "Application by For nce, and check are submitte	eign Limited Liability Com d to register the above refer	pany for Authoriza enced foreign limi	tion to Transact Business in Florida ted liability company to transact bus	." Certificate of iness in Florida.	
Please	return all correspondence e	oncoming this matter to the	following: 1			
	Erin Greenfield					
		Ŋ	ame of Person		- <del>-</del>	
	Continental Pro	perties Company, Inc.				
	Firm/Company					
	W134 N8675 E	xecutive Parkway				
			Address		-	
	Menomonee Falls, WI 53051					
		City/S	tate and Zip Code			
	egreenfield@cpro	openies.com		•		
		E-mail address: (to be use	d for future annual	report notification)	<b>-</b>	
For fur	ther information concerning	g this matter, please call:				
	Erin Greenfield		262 at (	532-9310		
	Name o	f Contact Person	Area Code	Daytime Telephone Number	– س	
	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	TILEU	
Enclose	ed is a check for the follow  \$125.00 Filing Fee	ing amount:  \$130,00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	g Fec & ■ \$160.00 Filing Fee, 0 of Status & Certified Co	Certificate =	

J V

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

IN COMPLIANCE WITH SECTION 605 0602, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY

COMPANY TO TRANSACT BU	SYNESS I	NTI IE STATE OF FLORIDA:				
L. Continental 406 Fund L	<b>L</b> C					
(Name of Foreign	Limited L	ability Company, must include "Limited	Liability Company," "L.L.C.," or "L.L.C.")			
It name anavailable, enter alternate na	une adopte	a fix the purpose of transacting duriness in Plotic	is. The alternate name must include "Limited Lisbi	lity Company," "L.L.C." or "LLC." 1		
2 Wisconsin			3 81-4275201			
(Juried chan under the law of wh	ech furvign	himsed lubility company is organized)	(Fit) number, if applicable)			
•						
	(Date (See	first transacted trustness in Florida, if prior to re- sections 605 0904 & 605 0905, F.S. to determine	putration() penalty furtility)	<del>*****</del>		
5. W134 N8675 Executive			6. W134 NS675 Executive Par	kway		
(Street Address of Principal Office)		fee)				
Menomonee Falls, WI	53051		Menomonee Falls, WI 53051			
<u> </u>						
<ol> <li>Name and <u>street address</u></li> </ol>	s of Flo	rida registered agent (P.O. Box.)	NOT acceptable)			
Name:	CT Co	rporation System	<del> </del>			
Office Address:	1200 S	outh Pine Island Road				
	Planta	tion				
	FRUITA	(Car)	Florida 33324 (Zip code)	<del></del>		
and accept the obligations	of nev	position as registered agent. Jan A J.J. A	and complete performance of my d ames M. Halpin Assistant Secretary	;; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		
	ν			- 25		
8. The name, title or capa <u>Title or Capacity:</u>	city and	address of the person(s) who has Name and Address:	Title or Capacity:	Name and Address:		
President of Contine	intal	Daniel J. Minahan	CEO of Continuated Imputer	James H. Schloemer		
Properties company, manager of contin	untai	W134 N8675 Executive Pkwv Menomonee Falls, WI 53051	CEO of Continuated Imperture companyline; Manager of Continuated 404 Fund LLC	W134NS675 Executive Pkwy Menomonee Falls, W150351		
Treasurer of Continue		Edward J. Madell	Secretary of Confinental	Paul R. Seifert		
hoperties company.	luc	W134 N8675 Executive Pkwy	Properties Contanu. Inc.	W134 N8675 Exeuctive Pkw Menonionee Falls, WI 50351		
manager of Contille	intal	Menomonee Falls, WI 50351	manager of continents of	Menomonee Fans, W1 30331		
hoperhies company, manager of Contille to Sond Cle (Use attachments if necess	sary)		Secretary of Continental Properties Confany, the, manager of Continental top Fund LLC			
<ol> <li>Attached is a certificate jurisdiction under the law of of the translator must be su</li> </ol>	of which	it is organized. (If the certificate	uly authenticated by the official haves in a foreign language, a translation	ring custody of records in the on of the certificate under oath		
10. This document is exect submitted in a document to	ated in a	occordance with section 605,0203 (partition of State constitutes a thir	(1) (b), Florida Statutes, I am aware d degree felony as provided for in s	that any false information 817.155, F.S.		
		大海 人名	Marchian	tWV		
		Signalum at	d degree felony as provided for in s	Ather		
		J. Minahan, President of Continer				
			rimal name of signer	<del>,</del>		

# 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:

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

#### CONTINENTAL 406 FUND 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 27, 2016.

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.

Winance Winanc

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official scal of the Department on July 21, 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:

204089-27837EC2