

MI8000005493

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

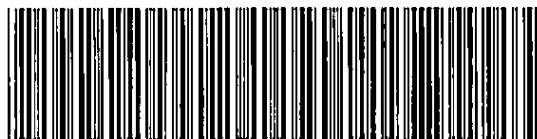
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JUN 11 PM 1:41
TALLAHASSEE, FLORIDA

SIMMONS
JUN 12 2018

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 250529 7931066

AUTHORIZATION :



COST LIMIT : \$ 125.00

ORDER DATE : June 11, 2018

ORDER TIME : 1:11 PM

ORDER NO. : 250529-005

CUSTOMER NO: 7931066

FOREIGN FILINGS

NAME: BLU54, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: _____

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BLU54, 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:

Quynh Sperrazza

Name of Person

M. A. Mortenson Company / Attn: Legal

Firm/Company

700 Meadow Lane North

Address

Minneapolis, MN 55422

City/State and Zip Code

quynh.sperrazza@mortenson.com

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

For further information concerning this matter, please call:

Quynh Sperrazza

763

287-5905

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. BLU54, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
N/A
(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. Minnesota
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 82-1954344
(FEI number, if applicable)
4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S., to determine penalty liability)
5. BLU54, LLC
(Street Address of Principal Office)
700 Meadow Lane North
Minneapolis, MN 55422
6. BLU54, LLC Attn: Legal
(Mailing Address)
700 Meadow Lane North
Minneapolis, MN 55422

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(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.

Roxanne Turner
(Registered agent's signature)

Roxanne Turner
Asst. Vice President

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

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>See Attachment.</u>	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

(Use attachments if necessary)

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)

10. 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.

Janice M. Gillespie
Signature of an authorized person
Janice M. Gillespie, Assistant Secretary
Typed or printed name of signer

Attachment - Officers of BLU54, LLC

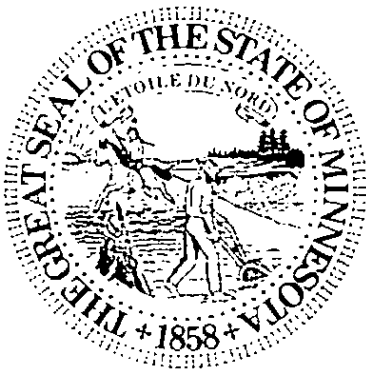
<u>Title or Capacity</u>	<u>Name and Address</u>
Chairman	David C. Mortenson, 700 Meadow Lane North, Minneapolis, MN 55422
President & Chief Manager	Daniel L. Johnson, 700 Meadow Lane North, Minneapolis, MN 55422
Chief Financial Officer	Lois M. Martin, 700 Meadow Lane North, Minneapolis, MN 55422
Chief Operating Officer	Thomas W. Wacker, 700 Meadow Lane North, Minneapolis, MN 55422
Senior Vice President	James J. Yowan, 700 Meadow Lane North, Minneapolis, MN 55422
Treasurer	Jennifer A. Facciani, 700 Meadow Lane North, Minneapolis, MN 55422
Secretary	Dwight A. Larson, 700 Meadow Lane North, Minneapolis, MN 55422
Assistant Secretary	Janice M. Gillespie, 700 Meadow Lane North, Minneapolis, MN 55422

**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: Blu54, LLC
Date Filed: 06/16/2017
File Number: 954503700026
Minnesota Statutes, Chapter: 322C
Home Jurisdiction: Minnesota

This certificate has been issued on: 06/08/2018



A handwritten signature in cursive script that reads "Steve Simon".

Steve Simon
Secretary of State
State of Minnesota