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Fax Number : (850)617-6383	<u>ک</u> ات ات
From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845	
<pre>**Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.**</pre>	2
Email Address:	
Foreign Limited Liability Company Continental Renter LLC	
Certified Copy 1 Page Count 04 Estimated Charge S155.00	
Estimated Charge S155.00	



1/1

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

IN COMPLIANCE WITH SECTION 601.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREION THATTED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

/isconsin	same adopted for the propose of transacting business t		47-5158546	1	.LC." or "11.
(Jurisdictina under the law et w	hich foreign feelled liability company is organized)	,.	(Pist number, if	applicable)	ي يې
				- 20	•
	(Date faid turnscred buygers in Florada, if pla (See accions 605 0904 & 505.0905, F.S. m dz	tennine benaxy.	(inhibty)	6	5
W134 N8675 Execut	live Parkway	6.	N8675 Executive Parkway	[-
(Street Address of	•		(Mailing Address)		
Menomonee Falls, V	/1 53051		Menomonee Falls, WI 53051	<u></u>	<u></u>
					<u>+</u>
				5.	لب
Name:	1200 Couth Bing Island Band				
Office Address:	1200 South Pine Island Road				
Office Address:	Plantation (City)		, Florida <u>33324</u> (Zap code)		
Office Address: egistered agent's acceptiving been named as resignated in this application comply with the provision of accept the obligation. The name, title or capa	Plantation (Cay) tance: rgistered agent and to accept service tion, I hereby accept the appointment ions of all statutes relative to the pro- s of my position as registered agent. (Reduced age (Reduced agent) (Reduced agent) (Reduced agent)	nt as registe per and con James Assista nt's ognicas) b has/have a	for the above stated limited liab red agent and agree to act in d aptere performance of my dutions 5 M. Halpin ant Secretary uthority to manage is/are:	his capaci es, and I c 	ily. I furth am familia
Office Address: gistered agent's acception using been named as re signated in this application comply with the provision d accept the obligation	Plantation (Cay) tunce: gistered agent and to accept service tion, I hereby accept the appointment ions of all statutes relative to the pro- s of my position as registered agent. (Registered agent	nt as registe per and con James Assista nt's ognicas) b has/have a	for the above stated limited liab red agent and agree to act in d aptere performance of my dutions S.M. Halpin ant Secretary uthority to manage is/are:	his capaci es, and I c 	ity: I furth

(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 Statutos. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony exprovided for in s.817.155, F.S.

simether а Signature of an authorized person **∑**m^ President of Continuental Properties Company inc., Dood or protocol and a ger of Continuental Renter LLC Dinin 1. Minahan

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Attachment to Application by Foreign Limited Liability Company For Authorization To Transact Business In Florida

Name of Foreign Limited Liability Company: Continental Renter LLC

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

Title or Capacity:	Name and Address	i
President of Continental Properties Company,	Daniel J. Minahan	
Inc., manager of Continental Renter LLC	W134 N8675 Executive Parkway	
		·51
CEO of Continental Properties Company,	James H. Schloemer	3]
Inc., manager of Continental Renter LLC	W134 N8675 Executive Parkway	
	Menomonee Falls, WI 53051	
Treasurer & Executive Vice President of	Edward J. Madell	31
Continental Properties Company, Inc.,	W134 N8675 Executive Parkway: 🔊 🖻	\bigcirc
manager of Continental Renter LLC	Menomonee Falls, WI 53051 ල ගා	_
Secretary & Executive Vice President of	Paul R. Seifert	
Continental Properties Company, Inc.,	W134 N8675 Executive Parkway	1
manager of Continental Renter LLC	Menomonee Falls, WI 53051	
Executive Vice President of Continental	Kimberly Grimm	
Properties Company, Inc., manager of	W134 N8675 Executive Parkway	1
Continental Renter LLC	Menomonee Falls, WI 53051	i
Vice President of Continental Properties	Ryan Folger	
Company, Inc., manager of Continental	W134 N8675 Executive Parkway	
Renter LLC	Menomonee Falls, WI 53051	
Vice Chairman of Continental Properties	Gerard Severson	
Company, Inc., manager of Continental	W134 N8675 Executive Parkway	
Renter LLC	Menomonee Falls, WI 53051	

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 RENTER 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 September 20, 2015.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120 Wis. Stats., and that it 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 21, 2018.

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.wdfl.org/apps/ccs/verify/ Enter this code: 223500-6090E2BD

