

M19000010693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

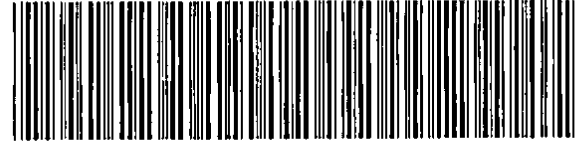
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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# CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 11/5/2019

Acc#120160000072

*en: SW*

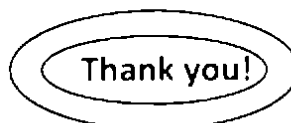
Name:	Gorman Architectural, LLC
Document #:	
Order #:	12371425

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	2019 Nov 5 11:10:56
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Ref# _____

Amount: \$ 155
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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Gorman Architectural, 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:

Tanya R. Braga, Paralegal

Name of Person

Reinhart Boerner Van Deuren s.c.

Firm/Company

1000 North Water Street, Suite 1700

Address

Milwaukee, WI 53202

City/State and Zip Code

tbraga@reinhartlaw.com

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

For further information concerning this matter, please call:

Tanya R. Braga, Paralegal

at ( 414 )

298-8354

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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$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

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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. Gorman Architectural, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(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. Wisconsin 3. N/A  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. N/A  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 200 North Main Street 6. 200 North Main Street  
(Street Address of Principal Office) (Mailing Address)  
Oregon, WI 53575 Oregon, WI 53575

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

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
(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.

CT CORPORATION

BY Stephanie Hencz, Asst. Secretary

Stephanie Hencz

(Registered agent's signature)

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8. For initial indexing purposes, list names, title or capacity and addresses of the persons authorized to manage [up to six (6) total]:

Title or Capacity:

Name and Address:

Persons authorized to

☐ Manager

Name: Gorman & Company, LLC

Title or Cap:

Address:

☒ Member

Address: 200 North Main Street

☐ Manager

☐ Authorized

Oregon, WI 53575

☐ Member

Person

☐ Authorized

☐ Other

☐ Other

Person

☐ Other

☐ Manager

Name: \_\_\_\_\_

☐ Manager

☐ Member

Address: \_\_\_\_\_

N

☐ Authorized

Person

☐ Member

Ad

☐ Authorized

☐ Other

☐ Other

Person

☐ Other

☐ Manager

Name: \_\_\_\_\_

☐ Manager

☐ Member

Address: \_\_\_\_\_

Name: \_\_\_\_\_

☐ Authorized

Person

☐ Member

Address: \_\_\_\_\_

☐ Authorized

☐ Other

☐ Other

Person

☐ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any person who knowingly and intentionally provides false information to the Department of State constitutes a third degree felony as provided for in s.817.155.

GORMAN & COMPANY, LLC, Sole Member  
BY

Gary J. Gorman, Manager

Signature of an authorized person

Typed or printed name of signer



200 N. Main Street | Oregon, WI 53575

P. (608) 835-3900

F. (608) 835-3922

www.GormanUSA.com

REAL ESTATE DEVELOPMENT

MILWAUKEE MIAMI PHOENIX CHICAGO DENVER

## LETTER OF CONSENT FOR USE OF SIMILAR NAME

November 4, 2019

To the Secretary of State of Florida:

Gorman Architectural Inc., a corporation organized and existing under the laws of the State of Illinois, hereby gives consent to Gorman Architectural, LLC for the use of its name in the qualification of the LLC with the Florida Secretary of State.

IN WITNESS WHEREOF, the undersigned has duly executed this Consent as of November 4, 2019.

GORMAN ARCHITECTURAL, INC.

BY

Brian Swanton, President

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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, David J Duecker, Deputy Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

**GORMAN ARCHITECTURAL, 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 04, 2019.

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 November 01, 2019.

A handwritten signature in black ink, appearing to read "David J Duecker".

DAVID J DUECKER, Deputy Administrator  
Division of Corporate and Consumer Services  
Department of Financial Institutions

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DFI/Corp/33

To validate the authenticity of this certificate

Visit this web address: <http://www.wdfl.org/apps/ccs/verify/>

Enter this code: 254443-BCE53FB5