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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

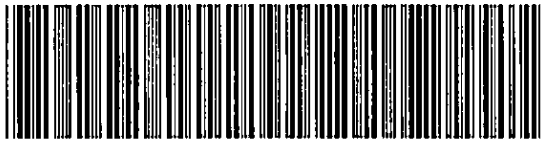
(Business Entity Name)

(Document Number)

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MAY 11 2020

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FILED

MAY 20 2020

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. 799 N Shore 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, USA
(Jurisdiction under the law of which foreign limited liability company is organized)

3. S127708
(FEL number, if applicable)

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

5. 799 N Shore Dr
(Street Address of Principal Office)
Anna Maria, FL 34216

6. 7880 N Club Circle
(Mailing Address)
Fox Point, WI 53217

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

Name: Jeff Hoehn

Office Address: 799 N Shore Dr

Anna Maria, Florida 34216
(City) (Zip code)

FILED
2011 AUG 31
11:45 AM
TALLAHASSEE, FLORIDA

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.


(Registered agent's signature)

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

Title or Capacity: Manager **Name and Address:** Name: Jeffrey C Hoehn
 Member Address: 7880 N Club Circle
 Authorized Fox Point, WI 53217
 Person _____
 Other _____ Other _____

Title or Capacity: Manager **Name and Address:** Name: Molly A Hoehn
 Member Address: 7880 N Club Circle
 Authorized Fox Point, WI 53217
 Person _____
 Other _____ Other _____

Manager Name: Troy T Baumann
 Member Address: 18875 Riversouth Terrace
 Authorized Unit 4
 Person Fairview Park, OH 44126
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____


Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

Manager Name: _____
 Member Address: _____
 Authorized _____
 Person _____
 Other _____ Other _____

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

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.



 Signature of an authorized person
 Jeffrey C Hoehn

 Typed or printed name of signee

DOM NEW
180 181 183

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, Patti Epstein, Administrator, Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

799 N SHORE LLC

is a domestic corporation or limited liability company organized under the laws of this state and that its date of incorporation or organization is April 21, 2020.

I further certify that the above referenced articles of incorporation or organization are the only charter document filed with this department for said corporation or limited liability company.

I further certify that said domestic 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 April 30, 2020.

Patti Epstein

PATTI EPSTEIN, Administrator
Division of Corporate and Consumer Services
Department of Financial Institutions

BY: DeLou Wilson



State of Wisconsin
Department of Financial Institutions

ARTICLES OF ORGANIZATION - LIMITED LIABILITY COMPANY

Executed by the undersigned for the purpose of forming a Wisconsin Limited Liability Company under Chapter 183 of the Wisconsin Statutes:

Article 1. **Name of the limited liability company:**

799 N Shore LLC

Article 2. **The limited liability company is organized under Ch. 183 of the Wisconsin Statutes.**

Article 3. **Name of the initial registered agent:**

Jeff Hoehn

Article 4. **Street address of the initial registered office:**

7880 N Club Circle
Milwaukee, WI 53217
United States of America

Article 5. **Management of the limited liability company shall be vested in:**

A member or members

Article 6. **Name and complete address of each organizer:**

Jeff Hoehn
7880 N Club Circle
Milwaukee, WI 53217
United States of America

Molly Hoehn
7880 N Club Circle
Fox Point, WI 53217
United States of America

Troy Baumann
18875 Riversouth Terrace
Unit 31
Fairview Park, OH 44126
United States of America

Other Information. **This document was drafted by:**

Jeff Hoehn

Organizer Signature:

Jeff Hoehn

jhoehn@nshorehc.com

Date & Time of Receipt:

4/21/2020 8:33:39 AM

Order Number:

202004215499766

ARTICLES OF ORGANIZATION - Limited Liability Company(Ch. 183)

Filing Fee: \$130.00
Total Fee: \$130.00



ENDORSEMENT

**State of Wisconsin
Department of Financial Institutions**

EFFECTIVE DATE	
4/21/2020	

FILED 4/21/2020	Entity ID Number S127708
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