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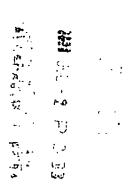
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## COVER LETTER

UBJECT:	Nagel Architects LLC, a series of Nage	el Services LLC		
object	Name	e of Limited Liability Company		
		Company for Authorization to Transact Business in Florida," Certificate referenced foreign limited liability company to transact business in Flori		
Please return a	ll correspondence concerning this matter to	o the following:		
	Gregory Nagel			
		Name of Person		
	Nagel Architects LLC, a series of N	lagel Services LLC		
		Firm/Company		
	13100 Watertown Plank Road			
		Address		
	Elm Grove, WI 53122			
	C	ity/State and Zip Code		
	greg.nagel@nagel.us			
	E-mail address: (to be	used for future annual report notification)		
For further info	ormation concerning this matter, please ca	И:		
Case	ey Unholz	262 649-2830 at ( )		
	Name of Contact Person	Area Code Daytime Telephone Number		
Mailing Address: Registration Section		Street Address: Registration Section		
Divi	sion of Corporations	Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
Talla	ahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	sed is a check for the following amount: e make check payable to: FLORIDA DEF	PARTMENT OF STATE		

July 2, 2020

GREGORY NAGEL 13100 WATERTOWN PLANK RD ELM GROVE, WI 53122

SUBJECT: NAGEL ARCHITECTS LLC, A SERIES OF NAGEL SERVICES LLC

Ref. Number: W20000068411

We have received your document for NAGEL ARCHITECTS LLC, A SERIES OF NAGEL SERVICES LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 120A00013003

Tracy L Lemieux Regulatory Specialist II

www.sunbiz.org

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

IN COMPILANCE 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:

name unavailable, emer alternate i	name adopted for the purpose of transacting business in Flori	ida The alternate i	ame must include "I	imited Liabili	ty Company," "I	l. C," or "l.
State of Illinois			85025			
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	3		FEI number, i	f applicable)	
	(Date first transacted business in Florida, if prior to re (See sections 605.0904 & 605.0905, F.S. to determine	gistration.) penalty liability)			_	
13100 Watertown Pl	ank Road		as #5			
treet Address of Principal Office)		0. <u>(N</u>	Inling Address)			
Elm Grove, WI 53122	2					
	<del>-</del>					
	<del></del>					
Name and street address	ss of Florida registered agent: (P.O. Box		ble)		<u> </u>	
. Name and street addres	ss of Florida registered agent: (P.O. Box	- <u>NOT</u> accepta	ble)	, Roy	· @	
	ss of Florida registered agent: (P.O. Box.)  Kristen Klein	- <u></u>	ble)	<b>200</b>		
. Name and street address Name:		NOT accepta	ble)			
Name:		NOT accepta	ble)	R. C. Steel		· · · · · · · · · · · · · · · · · · ·
	Kristen Klein	NOT accepta	ble)			
Name:	Kristen Klein	NOT accepta	3270	39		
Name:	Kristen Klein  520 North Orlando Ave Suite #205	N <u>OT</u> accepta	3278 . Florida	39 p code)		

(Registered agent's signature)

6-18-20

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:	Name and Address:	Title or Capacity:	Name and Address:		
□Manager	Name:	□Manager	Name: Casey Unholz		
■Member	Address:	□Member	Address:		
□Authorized	13100 Watertown Plank Road	Authorized	13100 Watertown Plank Road		
Person	Elm Grove, WI 53122	Person	Elm Grove, WI 53122		
□Other	□Other	Other	Other		
□Manager	Name:	□Manager	Name:		
□Member	Address:	□Member	Address:		
□Authorized		□Authorized			
Person		Person	3333		
Other	Other	□Other	Other		
□Manager	Name:	□Manager	Name:		
·		-			
□Member	Address:	□Member	Address:		
□Authorized		□Authorized			
Person		Person			
Other	Other	□Other	Other		

<u>Important Notice:</u> 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.

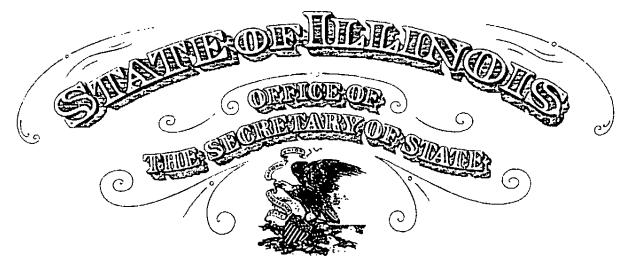
- 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must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

The Copy V. Nach

#### File Number

0328259-7



#### To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

NAGEL SERVICES LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MAY 26, 2010, AND HAVING ESTABLISHED A SERIES WITH THE DESIGNATED NAME OF NAGEL ARCHITECTS, A SERIES OF NAGEL SERVICES LLC ON JUNE 02, 2010, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 10TH day of JULY A.D. 2020 .

Authentication #, 2019201932 verifiable until 07/10/2021
Authenticate at: http://www.cybergriveillingis.com

SECRETARY OF STATE