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COVER LETTER

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	istration Section ision of Corporations					
g SUBJECT:	Manderson Properties, LLC					
SOBJECT.	Name	e of Limited Liability Company				
		Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida.				
Please return	all correspondence concerning this matter to	o the following:				
	Patrick W. Ledray					
		Name of Person				
	Ledray Law Office					
	Firm/Company 10740 Zieglers Drive Address					
	Brooklyn Park, MN 55443					
	C	ity/State and Zip Code				
	jmatt397@gmail.com					
	E-mail address; (to be	used for future annual report notification)				
For further in	nformation concerning this matter, please cal	II:				
Patr	rick W. Ledray	612 991-0564 at ()				
	Name of Contact Person	Area Code Daytime Telephone Number				
Mai	iling Address:	Street Address:				
Reg	gistration Section	Registration Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				
Tal	lahassee, FL 32314	2415 N. Monroe Street, Suite 810				
		Tallahassee, FL 32303				
	losed is a check for the following amount: see make check payable to: FLORIDA DEP	ARTMENT OF STATE				
□ \$	125.00 Filing Fee S130.00 Filing Fee Certificate o	· · · · · · · · · · · · · · · · · · ·				

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:

	Limited Liability Company; must include "Limite	·				
name unavailable, enter alternate	name adopted for the purpose of transacting business in F	lorida. The attern	ate name must include "Limited Lie	ability Company," "L.L.C," or "LI C		
Minnesota		3				
(Jurisdiction under the law of which foreign limited liability company is organized)			3. (Flif number, if applicable)			
na						
	(Date first transacted husiness in Florida, if prior to (See sections 605 0904 & 605,0905, F.S. to determ	registration.) inc penalty liabili	ity)			
11458 Kenyon Court NE		114	58 Kenyon Court NE			
et Address of Principal Office)		···	(Mailing Address)			
Minneapolis, MN 55449		Minneapolis, MN 55449				
	· · · · · · · · · · · · · · · · · · ·					
Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acce	ptable)	1741 1860 1870		
Name:	Jeffrey A. Matt		<u> </u>	13. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
Office Address:	3001 Dr. MLK Jr Street		_			
	St. Petersburgh		33704 , Florida	PM 3: 52		
	(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.

J. Matt. Matt. (Regished 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: Name and Address: Title or Capacity: Name and Address: Jeffrey A. Matt □Manager **■**Manager Name: ■ Member ☐ Member Address: _____ Minneapolis, MN 55449 Authorized □ Authorized Jeffrey A. Matt Person Person □Other___ □Other □Other Other □Manager □ Manager Name: _____ Name: ☐ Member □ Member Address: Address: ☐ Authorized ☐ Authorized Person Person ☐ Other □Other___ ☐Other □Other____ □Manager Name: Name: □Manager Address: □Member □Member Address: □ Authorized □ Authorized Person Person Other____ □Other_____ ☐Other_____ □Other____ Important Notice; Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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

Lyped or printed name of signee

Jeffrey A.Matt

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:

Manderson Properties LLC

Date Filed:

09/15/2020

File Number:

1177688900029

Minnesota Statutes, Chapter:

322C

Home Jurisdiction:

Minnesota

This certificate has been issued on:

10/13/2020



Steve Vimm

Steve Simon

Secretary of State State of Minnesota