

M21000003/70

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

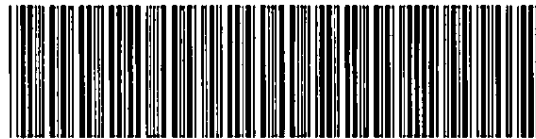
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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HELLMUTH
&
JOHNSON

WRITER'S DIRECT DIAL NO.: (952) 460-9298
E-MAIL: KKAMINSKI@HJLAWFIRM.COM

March 4, 2021

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Hooked on Bimini, LLC
Our File No.: 27780.0007

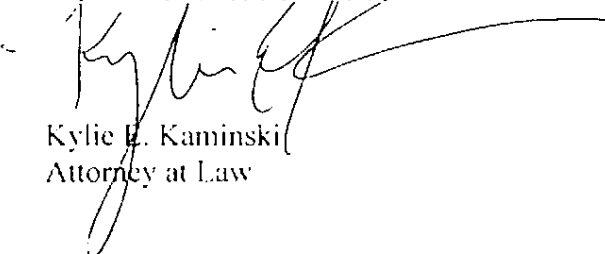
Dear Sir or Madam:

Enclosed for filing regarding the above-referenced entity, please find:

1. Cover Letter;
2. Application By Foreign Limited Liability Company for Authorization to Transact Business in Florida;
3. Certificate of Organization of Hooked on Bimini, LLC issued by the Minnesota Secretary of State on January 25, 2021; and
4. Check in the amount of \$125.00 for the related filing fee.

Very truly yours,

HELLMUTH & JOHNSON


Kylie L. Kaminski
Attorney at Law

KEK/ghb
Encs.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hooked on Bimini, 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:

Kylie E. Kaminski

Name of Person

Hellmuth & Johnson, PLLC

Firm/Company

8050 West 78th Street

Address

Edina, MN 55439

City/State and Zip Code

Sara.Martin@colliers.com

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

For further information concerning this matter, please call:

Kylie E. Kaminski

952

460-9298

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

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

IN COMPLIANCE WITH SECTION 605.06, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Home office address:

Sunrise Limited Liability Company, 10000 1st Avenue, Suite 100, Minneapolis, MN 55426

2. State of incorporation: Minnesota

3. Name of company:

Florida Sunrise Limited Liability Company

OFFICE OF THE CLERK

4. Date of registration: filing

10/10/2010

5. Principal office address:

24148 Superior Drive

Rogers, MN 55374

24148 Superior Drive

Rogers, MN 55374

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

Name: Sara Martin

Office Address:

3113 SUNNYBROOK CT

Cape Coral

33904

Florida

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.

[Signature]

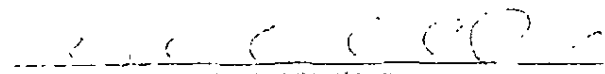
8. For initial indexing purposes, list names, title or capacity, and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☒ Manager	Name: Sara Martin	☐ Manager	Name: _____
☒ Member	Address: 24 48 Superior Drive	☐ Member	Address: _____
☒ Authorized	Rogers, MN 55374	☐ Authorized	_____
Person	_____	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____
☐ Manager	Name: _____	☐ Manager	Name: _____
☐ Member	Address: _____	☐ Member	Address: _____
☐ Authorized	_____	☐ Authorized	_____
Person	_____	Person	_____
☐ Other _____	☐ Other _____	☐ Other _____	☐ Other _____
☐ Manager	Name: _____	☐ Manager	Name: _____
☐ Member	Address: _____	☐ 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 indexed 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 605.0263 (1) (2), 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 authorized person
 Sara Martin, Chief Manager/President

 Typed or printed name of signer

Office of the Minnesota Secretary of State Certificate of Organization

I, Steve Simon, Secretary of State of Minnesota, do certify that: The following business entity has duly complied with the relevant provisions of Minnesota Statutes listed below, and is formed or authorized to do business in Minnesota on and after this date with all the powers, rights and privileges, and subject to the limitations, duties and restrictions, set forth in that chapter.

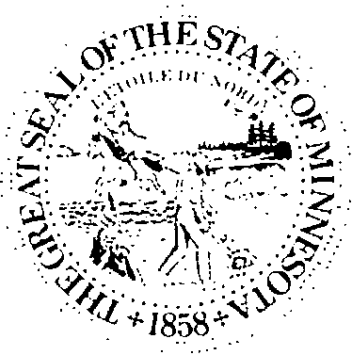
The business entity is now legally registered under the laws of Minnesota.

Name: Hooked on Bimini, LLC

File Number: 1212997500028

Minnesota Statutes, Chapter: 322C

This certificate has been issued on: 01/25/2021



A handwritten signature in cursive script that reads "Steve Simon".

Steve Simon
Secretary of State
State of Minnesota