# M21000004517

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Reinhart Boerner Van Deuren s.c P.O. Box 2018 Madison, WI 53701-2018

22 East Mifflin Street Suite 700 Madison, WI 53703

Telephone: 608-229-2200 Facsimile: 608-229-2100 reinhartlaw.com

May 8, 2024

Jackie Held Direct Dial: 608-229-2233 jheld@reinhartlaw.com

CD.

### VIA FEDEX DELIVERY

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

Dear Sir or Madam:

Re: 2720 Drane Field, LLC

Document Number: M21000004517

As it relates to 2720 Drane Field, LLC, enclosed please find the following:

- 1. Application by Foreign Limited Liability Company to file Amendment to Certificate of Authority to Transact Business in Florida;
- 2. Articles of Amendment of 2720 Drane Field, LLC, filed April 30, 2024;
- 3. Wisconsin Certificate of Good Standing of Pipkin Parkway, LLC; and
- 4. Check for \$25.00 filing fee payable to the Florida Department of State.

Please return all correspondence concerning this matter to my attention. Should you have any further questions or comments, please contact me at (608) 229-2233.

Sincerely,

Jackie Held, Paralegal

Attachments

cc Joia Sanders Wodarczyk Peter C. Vogel

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appear	rs on the records of the Florid	la Department of
State: 2720 Drane Field, LLC		
Enter new principal office address, if applicable:	n/a	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	n/a	:
2. The Florida document number of this limited lia	ability company is: M210000	004517
3. Jurisdiction of its organization: Wisconsin		. : 
3. Jurisdiction of its organization: Wisconsin  4. Date authorized to do business in Florida: March 30, 2021		
SECTION II (5-9 complete only the applicable	changes)	
5. New name of the limited liability company: Pi (mus	ipkin Parkway, LLC t contain "Limited Liability	Company, ""L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or manust contain "Limited Liability Company," "L.L.C	naging members adopting th	ng business in Florida and attach a c alternate name
6. If amending the registered agent and/or registere registered agent and/or the new registered office ac	ed officer address on our rec ddress here:	ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Flo	rida Street Address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered aget the provisions of all statutes relative to the proper and accept the obligations of my position as regist document is being filed to merely reflect a change liability company has been notified in writing of the	nt and agree to act in this ca and complete performance of tered agent as provided for it in the registered office addr	of my duties, and I am familiar with a Chapter 605, F.S. Or, if this

. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:				
tle/ Capacity	<u>Name</u>	Address	Type of Action	
			□Add	
			□Remo	
			□Add	
			□Remo	
	. <del>.</del>		□Add	
<u>.                                    </u>			□Add	
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			DAdd	
aforementioned am	ne law of which this entity is organ	the official having custody of records in nized.	□Remo	
	Puter (. Vogil  Signature of the second seco	the authorized representative		

Filing Fee: \$25.00

## 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, Craig Heilman, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

## PIPKIN PARKWAY, 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 March 03, 2021.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.0214 or 183.0212 Wis. Stats., but that it has not filed a statement or articles of dissolution.

Financial Millions and Millions of Wiscontinuous

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on May 08, 2024.

CRAIG HEILMAN, Administrator Division of Corporate and Consumer Services Department of Financial Institutions

DFI/Corp/33

## To validate the authenticity of this certificate

Visit this web address: https://apps.dfi.wi.gov/apps/ccs/verify/

Enter this code: 388454-8

388454-89E61D42



## **FILING FEE \$40.00**

Please check box to request **Optional Expedited Service** 

+ \$25.00

**FORM 504** 

## AMENDMENT TO

ARTICLES OF ORG LIMITED LIABILIT Sec. <u>183.0202</u> , Wi	Y COMPANY
1. The limited liability company name (prior to any char	nge effected by this amendment) is:
2720 Drane Field, LLC	
(Enter limited liability compar	y name, prior to any change)
2. Date of filing of its initial Articles of Organization: N	1arch 3, 2021
3. Text of Amendment (Identify each item of the current how the amended item is to read. Attach additional page	articles of organization that is being amended and
Article 1 is being amended in its entirety and shall re	ead as follows:
Article 1. Name of the limited liability comp Pipkin Parkway, LLC	pany:
	···
	: ~:
	17
4. This document must be signed by a person authorized	by the company:
— Decadegated by	April 25, 2024
Piter ( Voy). Signature	Date
Peter C. Vogel	Member
Printed Name	Title
This document was drafted by Nathan Wautier	
(Name the individua	d who drafted the document)
(Optional) This document has a delayed effective date/ti	me of:(up to 90 days after received date)

#### Contact Information:

Jackie Held, Reinhart Boerner Van Deuren s.c.					
	Name				
22 East Mifflin Street	, Suite	700			
Mailing Address					
Madison	WI	53703			
City	State	Zip Code	·		
jheld@reinhartlaw.co	m 6	808-229-2233			
Fmail Address		Phone Number			

**INSTRUCTIONS** (Refer to section 183.0202, Wis. Stats., for document content)

Please use BLACK ink. Submit one original to State of WI-Dept. of Financial Institutions, Box 93348, Milwaukee WI, 53293-0348, together with a check for the \$40.00 filing fee, payable to the Department of Financial Institutions. (If sent by express or priority U.S. mail, please mail to State of WI-Dept. of Financial Institutions, Division of Corporate and Consumer Services, 4822 Madison Yards Way, 4th Fl., North Tower, Madison WI, 53705.) If requesting optional expedited service, please check the expedited service box in the upper-right corner of the first page and include an additional \$25.00. Filing fees are non-refundable. This document can be made available in alternate formats upon request to qualifying individuals with disabilities. Upon filing, the information in this document becomes public and might be used for purposes other than those for which it was originally furnished. If you have any questions, please contact the Division of Corporate & Consumer Services at 608-261-7577 (hearing-impaired may call 711 for TTY) or by email at DFICorporations@dfi.wisconsin.gov.

- Item 1. State the name of the limited liability company (before any change effected by this amendment).
- Item 2. Enter the date the initial articles of organization were filed.
- Item 3. Specify the amendment(s) to the limited liability company's articles of organization by identifying each item that is being amended, and how the amended item is to read.
- Item 4. The document must be executed by one or more persons authorized by the company.

Drafter name. If the document is executed in Wisconsin, section 182.01(3) of the Wisconsin Statutes requires that it include the name of the drafter. If the document is not executed in Wisconsin, so indicate in the space provided for the drafter's name.

Optional delayed effective date/time. This document may declare a delayed effective date and time. The effective date/time may not be before, or more than 90 days after, the document is received by the Department of Financial Institutions for filing. If no effective date/time is specified, the document will take effect at the close of business on the date it is received for filing by the Department.



For Office



## State of Wisconsin

## Department of Financial Institutions

## Endorsement

## ARTICLES OF AMENDMENT - DOMESTIC LIMITED LIABILITY COMPANY - FORM 504 - Ch. 183 2720 DRANE FIELD, LLC

Received Date: 4/29/2024 FILED

Filing Fee: \$40.00

Expedited Fee: \$25.00 Entity ID#: T089550

Total Fee: \$65.00

NAME CHG

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