

M21000009888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

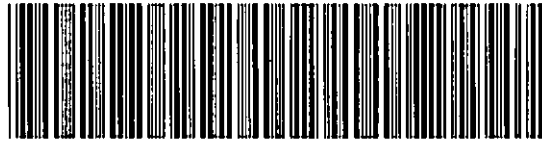
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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21 JUL 29 AM 8:58
TALLAHASSEE, FLORIDA

21321

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Changing Headlines 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:

Mark P. Brettingen

Name of Person

Changing Headlines, LLC

Firm/Company

7006 Wacklight St.

Address

Sarasota, FL 34243

City/State and Zip Code

Markbrettingen@sbcglobal.net

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

For further information concerning this matter, please call:

Mark P. Brettingen

Name of Contact Person

at (920)

Area Code

427-7080

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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Changing Headlines L.L.C.
(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 3. 39191090
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

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

5. _____
(Street Address of Principal Office)

6. _____
(Mailing Address)

7006 Couchlight St.
Sarasota, FL

7006 Couchlight St
Sarasota, FL 34243

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

Name: Mark P. Brettinger

Office Address: 7006 Couchlight St
Sarasota Florida 34243
(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.

Mark P. Brettinger
(Registered agent's signature)

FILED
21 JUL 29 AM 8
SARASOTA, FL
CLERK OF CIRCUIT COURT

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:

☒ Manager Name: Mark P. Brettinson
☐ Member Address: 2006 Coachlight St.
☐ Authorized Sarasota, FL 34243
Person _____
☐ Other _____ ☐ Other _____

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

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

Title or Capacity:

Name and Address:

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

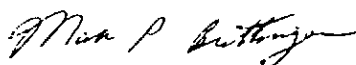
☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ Other _____ ☐ Other _____

☐ 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

Wisconsin Department of Financial Institutions

Strengthening Wisconsin's Financial Future

Search for:
changing headlines llc

Search Records [Search](#)
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Corporate Records

Result of lookup for **C045791** (at 7/26/2021 1:08 PM)

CHANGING HEADLINES, L.L.C.

You can: [File an Annual Report](#) - [Request a Certificate of Status](#) - [File a Registered Agent/Office Update Form](#)

Vital Statistics

Entity ID C045791

Registered Effective Date 12/23/1997

Period of Existence PER

Status Restored to Good Standing [Request a Certificate of Status](#)

Status Date 10/08/2019

Entity Type Domestic Limited Liability Company

Annual Report Requirements Limited Liability Companies are required to file an Annual Report under s. 183.0120, WI Statutes.

Addresses

Registered Agent Office MARK BRETTINGEN
2631 N MEADE ST
APPLETON, WI 54911-2203

[File a Registered Agent/Office Update Form](#)

Principal Office 2631 N MEADE ST
APPLETON, WI 54911-2203
UNITED STATES OF AMERICA

Historical Information

Annual Reports

Year	Reel	Image	Filed By	Stored On
2019	000	0000	online	database
2017	000	0000	online	database
2015	000	0000	online	database
2014	000	0000	online	database
2013	000	0000	online	database

DFI/CORP/38
RECORD 1/11

United States of America
State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, GEORGE PETAK, Administrator, Division of Corporate and Consumer Services, do hereby certify that the annexed copy has been compared by me with the record on file in the Corporation Section of the Division of Corporate & Consumer Services of this department and that the same is a true copy thereof and the whole of such record; and that I am the legal custodian of said record, and that this certification is in due form.



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

George Petak

GEORGE PETAK, Administrator
Division of Corporate and Consumer Services
Department of Financial Institutions

DATE: JUL 29 2014

BY: *Paul Kay*

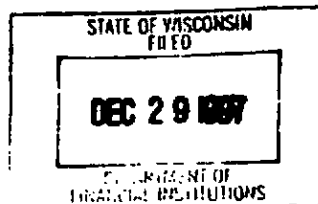
Effective July 1, 1996, the Department of Financial Institutions assumed the functions previously performed by the Corporations Division of the Secretary of State and is the successor custodian of corporate records formerly held by the Secretary of State.

**ARTICLES OF
ORGANIZATION**

CHAP. 183

\$13000

Kc



97 DEC 23 A 8:00

**ARTICLES OF ORGANIZATION
OF
CHANGING HEADLINES, L.L.C.**

These Articles of Organization are executed by the undersigned for the purpose of forming a Wisconsin limited liability company under chapter 183 of the Wisconsin Statutes.

ARTICLE 1

DEC 23 12:00PM

179232 DCORP136

#. #

179232 DCORP136

130.00

The name of the limited liability company is Changing Headlines, L.L.C.

ARTICLE 2

The street address of the initial registered office is 2631 North Meade Street, Appleton, WI 54911-2203.

ARTICLE 3

The name of the initial registered agent at the above registered office is Mark P. Brettingen.

ARTICLE 4

Management of the limited liability company shall be vested in its managing member.

ARTICLE 5

The name and complete address of the organizer is:

Mark P. Brettingen, 2631 North Meade Street, Appleton, WI 54911-2203

Dated this 18 day of December, 1997.

Mark P. Brettingen
Mark P. Brettingen, Organizer

This document was drafted by:

Paul J. Payant
SOMMER, OLK, SCHROEDER & PAYANT
Bank One Building
P. O. Box 308
Antigo, WI 54409
(715)623-3743

Please return acknowledgment to:

Paul J. Payant
SOMMER, OLK, SCHROEDER & PAYANT
Bank One Building
P. O. Box 308
Antigo, WI 54409
(715)623-3743

12 C045791