

M21000010253

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

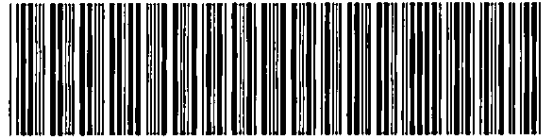
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 AUG 10 AM 8:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2021 AUG -10 AM 8:52

AUG 10 2021

Hill and Associates
Randy D. Hill
Federal and State Taxation
National Society of Accountants

320 County Road 1391
Falkville, AL 35622-3417

(256) 919-4491
randydh@bellsouth.net

August 3, 2021

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

RE: Registration of a foreign LLC.

Dear Sir or Madam:

Enclosed please find our forms to register a foreign LLC for the purpose of conducting business in Florida. The LLC currently exists pursuant to meeting all requirements under the laws of the State of Illinois as follows:

Banner Harvest, LLC
111 East Valley View Drive
Banner, IL 61520-9329

We have attached a cover letter (1 page); an application to register a foreign LLC (2 pages); and State of Illinois letter of "Good Standing" (1 page).

We deeply appreciate your kind assistance in this matter.

Respectfully,



Randy D. Hill
Hill and Associates
Alabama Accountant
NSA# 1101121669
IRS# P0-1383606

Cc: File
Banner Harvest, LLC

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: BANNER HARVEST, 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:

RANDY D. HILL

Name of Person

Hill & Associates

Firm/Company

320 County Road 1391

Address

Falkville, AL 35622-3417

City/State and Zip Code

randydh@bellsouth.net

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

For further information concerning this matter, please call:

RANDY D. HILL

256

919-4491

at ()

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

1. BANNER HARVEST, 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. ILLINOIS 3. 82-4358332
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. NOT APPLICABLE
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1212 SOUTH MAIN STREET 6. 1212 SOUTH MAIN STREET
(Street Address of Principal Office) (Mailing Address)

WILDWOOD, FL 34785 WILDWOOD, FL 34785

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

Name: JASON BECKFORD
Office Address: 1001 BLUEGRASS DRIVE
GROVELAND 34736
(City) Florida (Zip code)

2021 AUG -10 AM 8:52

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.


(Registered 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:**
☒ Manager Name: PAUL W. IMOBERSTAG
☐ Member Address: 215 West Valley View Dr., Unit
☒ Authorized Banner, Illinois 61520
Person
☐ Other ☐ Other

☐ Manager Name: VICKI J. IMOBERSTAG
☒ Member Address: 215 West Valley View Dr., Unit
☐ Authorized Banner, Illinois 61520
Person
☐ Other ☐ Other

☐ Manager Name: N/A
☐ Member Address:
☐ Authorized
Person
☐ Other ☐ Other

Title or Capacity: **Name and Address:**
☒ Manager Name: YOLANDA O. IMOBERSTAG
☐ Member Address: 215 West Valley View Dr. Unit
☒ Authorized Banner, Illinois 61520
Person
☐ Other ☐ Other

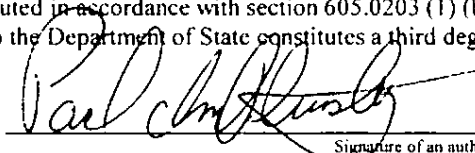
☐ Manager Name: GEORGE A. GRIEVES
☒ Member Address: 1205 Sunset Dr. East
☐ Authorized East Peoria, Illinois 61611
Person
☐ Other ☐ Other

☐ Manager Name: N/A
☐ 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

PAUL W. IMOBERSTAG
Typed or printed name of signer

File Number

0765225-9



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

BANNER HARVEST, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MARCH 11, 2019, 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 26TH
day of JULY A.D. 2021 .

Jesse White

SECRETARY OF STATE