Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220001438683)))



H220001438683ABC1

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845

Fax Number : (614)573-3996

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:\_

## Foreign Limited Liability Company Michael Best Consulting, LLC

Certificate of Status	U
Certified Copy	l l
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

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

Wisconsin  2	(El number, if applicable)  (Date first iransacrid business in Florida. If prior to registration.) (See sections 003.0964 & 60) 0903. 2 a to determine perally liability.  N. Water St., Ste. 2500  (Halling Address)  Woulkee, W1 53202-3509  Milwaukee, W1 53202-3509  Milwaukee, W1 53202-3509  Annual Street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System  Name:  1200 South Pine Island Road  Office Address:	Wisconsin    Second Company   Compan	Michael Best Consultin	g, I.I.C		
Wisconsin  2. (Surveine involer the law of which foreign furnied trability company is organized)  4. (Oute first transacted business in Florida, if prior to registration) (See sections 603,0904 & 603,0905, F.s. to determine perolity hability)  790 N. Water St., Ste. 2500  5. (Street Address of Principal Office)  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  C T Corporation System	Object first transacted business in Florida, if prior to regulation (See section 003.0904 & 003.0904 & 003.0905 S to determine peruly liability)  N. Water St., Ste. 2500  Gets of Pracipal Office)  Wankee, W1 53202-3509  And and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System  Name:  C T Corporation System  Plantation  Office Address:  Plantation  3. (FEI number, if applicable)  (FEI number, if applicable)  (FEI number, if applicable)  (FEI number, if applicable)	Second   S	(Name of Foreign	Limited Liability Company; must include "Limited L	izbility Company,""L.L.C.," or "LLC	( '')
Wisconsin  7.   (Juridiction index the law of which foreign furned flability company to organized)  4.   (Date first transacted bigness in Florida, it prior to registration) (See sections 603.0904 & 603.0905, F.S. to determine peralty flability)  790 N. Water St., Ste. 2500  6.   (Mailing Address)  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	Object first transacted business in Florida, if prior to regulation (See section 003.0904 & 003.0904 & 003.0905 S to determine peruly liability)  N. Water St., Ste. 2500  Gets of Pracipal Office)  Wankee, W1 53202-3509  And and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System  Name:  C T Corporation System  Plantation  Office Address:  Plantation  3. (FEI number, if applicable)  (FEI number, if applicable)  (FEI number, if applicable)  (FEI number, if applicable)	Second   S				
(FEI number, if applicable)  (Object first transacted business in Florida, if prior to registration.) (See sections 603,0904 & 603,0903, F.S. to determine persity liability)  790 N. Water St., Ste. 2500  (Street Address of Principal Office)  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System	diction under the law of which foreign lumined liability company is organized)  (Date this transacred bissues in Phorida, if prior to regularized)  (See sections 603.0904 & 603.0903, F.S. to determine peralty liability)  N. Water St., Ste. 2500  6. (Multing Address)  waukee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  CT Corporation System  Name:  1200 South Pine Island Road  Office Address:  Plantation  3. ((E.I number, if applicable)  (F.O. Box NOT acceptable)  3. ((E.I number, if applicable)  (F.O. Box NOT acceptable)	(Date first transported burnless in Florida, if prior to registration) (See sections 605,0904 & 603 0905, F.s. to determine peralty flability)  790 N. Water St., Ste. 2500  6. (Mailing Address)  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  1200 South Pine Island Road  Office Address:  Plantation  33324  Florida  33324	fisame unavaitable, ester alternate e	name adopted for the purpose of transacting business in Flori	da. The afterrate name must judiede "Limse	ed Liability Company," "L L C," or "LLC.")
(See sections of Principal Office)  Milwaukee, W1 53202-3509  79. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System	(Dute first transacted business in Florida, if prior to registration) (See sections 603,0904 & 603,0905, F.S. to determine peralty flability)  N. Water St., Ste. 2500  6. 790 N. Water St., Ste. 2500  waukee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  C T Corporation System  Name:  1200 South Pine Island Road  Office Address:  Plantation  33324	(Date final transacted business in Florida, (Finite to registration) (See sections 003.0964 & 003.0903. 25 to determine peralty flability)  790 N. Water St., Ste. 2500  6. (Nathing Address)  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  C T Corporation System  Name:  1200 South Pine Island Road  Plantation  Plantation  33324  Florida				
(See sections 605,0504 & 605 0505, F.S. to determine peralty liability)  790 N. Water St., Ste. 2500  6. (Mailing Address)  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System	(See sections 603,0904 & 603 0903, F.S. to determine peralty liability)  N. Water St., Ste. 2500  6. (Mailing Address)  waukee, W1 53202-3509  Milwaukee, W1 53202-3509  Milwaukee, W1 53202-3509  C T Corporation System  Name:  1200 South Pine Island Road  Office Address:  Plantation  33324	(See sections 605,0904 & 603 0905, F.S. to determine permity habital)  790 N. Water St., Ste. 2500  6: Address of Principal Office)  Milwaukee, W1 53202-3509  Milwaukee, W1 53202-3509  Milwaukee, W1 53202-3509  Milwaukee, W1 53202-3509  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System  Name:  1200 South Pine Island Road  Office Address:  Plantation  Florida  33324	(Jurisdiction under the law of w	hick foreign lunded liability company is organized)	J(FE) r	number, if applicable)
(See sections 605,0904 & 605 0905, F.S. to determine peralty habitaly)  790 N. Water St., Ste. 2500  6. (Mailing Address)  Milwaukee, W1 53202-3509  Milwaukee, W1 53202-3509  790 N. Water St., Ste. 2500  Milwaukee, W1 53202-3509  790 N. Water St., Ste. 2500  Milwaukee, W1 53202-3509  790 N. Water St., Ste. 2500  Milwaukee, W1 53202-3509  790 N. Water St., Ste. 2500  790 N. Water St., Ste. 2500	(See sections 603,0904 & 603 0903, F.S. to determine peralty liability)  N. Water St., Ste. 2500  6. (Mailing Address)  waukee, W1 53202-3509  Milwaukee, W1 53202-3509  Milwaukee, W1 53202-3509  C T Corporation System  Name:  1200 South Pine Island Road  Office Address:  Plantation  33324	(See sections 605,0904 & 603 0905, F.S. to determine permity habital)  790 N. Water St., Ste. 2500  6: Address of Principal Office)  Milwaukee, W1 53202-3509  Milwaukee, W1 53202-3509  Milwaukee, W1 53202-3509  Milwaukee, W1 53202-3509  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System  Name:  1200 South Pine Island Road  Office Address:  Plantation  Florida  33324				
790 N. Water St., Ste. 2500  Street Address of Practipal Office)  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System	N. Water St., Ste. 2500  dress of Procept Office)  wankee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  C T Corporation System  Name:  1200 South Pine Island Road  Plantation  33324	790 N. Water St., Ste. 2500  6: 790 N. Water St., Ste. 2500  6: (Mailing Address)  Milwaukee, W1 53202-3509  Milwaukee, W1 53202-3509  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  Name:  C T Corporation System  Name:  1200 South Pine Island Road  Plantation  Florida  33324  Florida	·	(Date first iransacted business in Florida, if prior to reg	estration )	
Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  C T Corporation System	these of Principal Office)  Walkee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  The and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System  Name:  1200 South Pine Island Road  Office Address:  Plantation 33324	Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System  Name:  1200 South Pine Island Road  Plantation  Plantation  33324  Florida  33324	700 N. Water St. Ste.			500
Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System	Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Milwaukee, WI 53202-3509  Page 2  C T Corporation System  Name:  1200 South Pine Island Road  Office Address:  Plantation 33324	Milwaukee, W1 53202-3509  Milwaukee, W1 53202-3509  Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System  Name:  1200 South Pine Island Road  Plantation  33324  Florida  Florida				
7. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)  C T Corporation System	Name:    C T Corporation System   1200 South Pine Island Road   Plantation   33324	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System  Name:  1200 South Pine Island Road  Office Address:  Plantation  33324  Florida			N79	500
Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System	Name:    C T Corporation System   1200 South Pine Island Road   Plantation   33324	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)  C T Corporation System  Name:  1200 South Pine Island Road  Office Address:  Plantation  33324  Florida	Milwaukee, WI 53202	3509	Milwaukee, wi 55202-5	<u> </u>
C T Corporation System	Name:  C T Corporation System  Name:  1200 South Pine Island Road  Office Address:  Plantation 33324	Name:  C T Corporation System  1200 South Pine Island Road  Office Address:  Plantation  33324  Florida				F327
C T Corporation System	Name:  C T Corporation System  Name:  1200 South Pine Island Road  Office Address:  Plantation 33324	Name:  C T Corporation System  1200 South Pine Island Road  Office Address:  Plantation  33324  Florida				
C T Corporation System	Name:  C T Corporation System  Name:  1200 South Pine Island Road  Office Address:  Plantation 33324	Name:  C T Corporation System  1200 South Pine Island Road  Office Address:  Plantation  33324  Florida	<del>_</del>			7.0
· · · · · · · · · · · · · · · · · · ·	Name:  1200 South Pine Island Road  Office Address:  Plantation 33324	Name:  1200 South Pine Island Road  Office Address:  Plantation  33324  Florida	. Name and street addre	ss of Florida registered agent: (P.O. Box ]	NOT acceptable)	Ser 5
· · · · · · · · · · · · · · · · · · ·	Name:  1200 South Pine Island Road  Office Address:  Plantation 33324	Name:  1200 South Pine Island Road  Office Address:  Plantation  33324  Florida				026
	Office Address:  Plantation 33324	Office Address:  Plantation  33324  Florida				
1000 Cook Plan Island Road	Office Address: 33324	Office Address:  Plantation  33324  Florida	Name:	C T Corporation System	<u> </u>	
	Plantation 33324	, Florida	Name:		<del></del>	
Plantation 33324	Florida	, Florida				
, Florida	(Zipsolt)	(Cig)		1200 South Pine Island Road	33324	
(City)	(City)			1200 South Pine Island Road Plantation	33324 , Florida (Giova	Je}
Registered agent's acceptance:	ered agent's acceptance:		Office Address:	Plantation (Cip)		
laving been named as registered agent and to accept service of process for the above stated limited liability company at	g been named as registered agent and to accept service of process for the above stated limited liability company at the place	- ' I in this continuition I has aby account the appointment as repulsived divert and affect the account in a factor was " " " " " " " " " " " " " " " " " " "	Office Address: Registered agent's acceptaining been named as re	Plantation (Cip)  otance: egistered agent and to accept service of president the appointment as	ocess for the above stated limi	ited liability company at the place act in this capacity. I further agre
Having been named as registered agent and to accept service of process for the above stated limited liability company at designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I fu to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am fami	s been named as registered agent and to accept service of process for the above stated limited liability company at the place ated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agruptly with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with	signated in this application, I hereby accept the appointment as registered agent and agree to defin this capacity. Typically, agree as comply with the provisions of all statutes relative to the proper and complete performance of my dutles, and I am familiar with	Office Address:  Registered agent's acception of the second agent's acception of the second agent's acception of the second agent ag	Plantation  (Cip)  stance: egistered agent and to accept service of president, I hereby accept the appointment as tions of all statutes relative to the proper a	ocess for the above stated limi	ited liability company at the place act in this capacity. I further agree my dutles, and I am familiar with
designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. The to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am family comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am family complete performance of my duties, and I am family complete performance of my duties, and I am family complete performance of my duties, and I am family complete performance of my duties, and I am family complete performance of my duties, and I am family complete performance of my duties, and I am family complete performance of my duties, and I am family complete performance of my duties, and I am family complete performance of my duties, and I am family complete performance of my duties, and I am family complete performance of my duties, and I am family complete performance of my duties, and I am family complete performance of my duties, and I am family complete performance of my duties.	the been named as registered agent and to accept service of process for the above stated limited liability company at the place at the appointment as registered agent and agree to act in this capacity. I further agree that the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with	rignated in this application, I hereby accept the appointment as registered agent and agree to definitions of all statutes relative to the proper and complete performance of my duties, and I am familiar with	Office Address:  Registered agent's acception of the second agent's acception of the second agent's acception of the second agent ag	Plantation  (Cip)  Otance:  existered agent and to accept service of prairies, I hereby accept the appointment as tions of all statutes relative to the proper accept the appointment as the accept the appointment accept the accept th	rocess for the above stated limi registered agent and agree to and complete performance of t	ited liability company at the place act in this capacity. I further agree my dutles, and I am familiar with Stephanie Hencz.
Having been named as registered agent and to accept service of process for the above stated limited liability company at designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I fut to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am family the provision of all statutes relative to the proper and complete performance of my duties. Stephanie Hencz	the been named as registered agent and to accept service of process for the above stated limited liability company at the place ated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree ply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with cept the obligations of my position as registered agent.  CT Corporation System  CT Corporation System	comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with advance of the obligations of my position as registered agent.  C. T. Corporation System	Office Address: Registered agent's acception that as redesignated in this applicate comply with the provisuand accept the obligation	Plantation  (Cip)  Stance:  registered agent and to accept service of pration, I hereby accept the appointment as sions of all statutes relative to the proper acts of my position as registered agent.  C T Corporation System	rocess for the above stated limi registered agent and agree to and complete performance of t	ited liability company at the place act in this capacity. I further agre- my duties, and I am familiar with Stephanie Hencz.

Page: 4 of 5

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:	
□Manager	Name: Michael Best & Friedrich LLP		Name: Michael Best & Friedrich LLP
⊡Member	Address: 790 N. Water St., Ste. 2500	□Member	Address: 790 N. Water St., Ste. 2500
□Authorized	Milwaukes, W1 53202-3509	[]Authorized	Milwaukee, WI 53202-3509
Person		Person	
Other	- ·		Other
□Monager	Name:	□Manager	Name:
□Member	Address:	□Member	Address:
∐Authorized		□Authorized	
Person		Person	
		[]Other	Other
□Manager	Name:	□Manager	Nanie:
□Member	Address:	□Member	Address:
□Authorized		□Authorized	
Person		Person	
ClOther	Other	□Other	Other
<ol> <li>indexed individual</li> <li>Attached is a ce jurisdiction under of the translator m</li> </ol>	t is executed in accordance with accion 605.0 ument to the Department of State constitutes a	Florida Department of Stated, duly authenticated by the cate is in a foreign language (203 (1) (b), Florida Statute	te Annual Report form.  The official having custody of records in the see, a translation of the certificate under oath see. I am aware that any false information

## United States of America State of Wisconsin

2022-04-20 14:01:45 PDT

#### DEPARTMENT OF FINANCIAL INSTITUTIONS

Division of Corporate & Consumer Services



From: Kaity Toor

To All to Whom These Presents Shall Come, Greeting:

I, Michelle Y. Knuese, Administrator of the Division of Corporate and Consumer Services, Department of Financial Institutions, do hereby certify that

### MICHAEL BEST CONSULTING, 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 01, 2017.

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 183.0120 Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hercunto set my hand and affixed the official scal of the Department on April 20, 2022.

MICHELLE Y. KNUESE, 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: http://www.wdfi.org/apps/ccs/verify/

Enter this code:

329291-CC52D1DC