

M22000010829

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

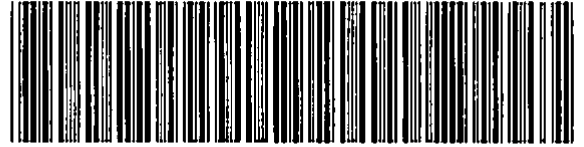
(Business Entity Name)

(Document Number)

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2022 JUN -5 PM 7:05

S. FRANKLIN
JUL 13 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S & L Properties Lakewood Ranch 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:

Richard A. Latta, Esq.

Name of Person

Stafford Rosenbaum LLP

Firm/Company

222 West Washington Avenue, Suite 900

Address

Madison, WI 53703

City/State and Zip Code

tammy@bleedblue.net

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

2012 JUN -5 PM 7:05

For further information concerning this matter, please call:

Richard A. Latta

608

259-2648

Name of Contact Person

at ()

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. S & L Properties Lakewood Ranch LLC

(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

(Jurisdiction under the law of which foreign limited liability company is organized)

3.

(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)

2651 Kirking Court

5. (Street Address of Principal Office)

Portage, WI 53901

2651 Kirking Court

6. (Mailing Address)

Portage, WI 53901

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

Name:

CT Corporation *System*

Office Address:

1200 South Pine Island Road, #250

Plantation

(City)

, Florida

33324

(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.

Stephanie Picco

(Registered agent's signature)

Stephanie Picco

Assistant Secretary

1022 J/1 -5 PIA 7:05

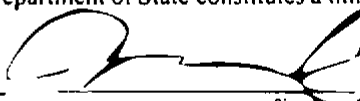
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>		<u>Name and Address:</u>		<u>Title or Capacity:</u>		<u>Name and Address:</u>	
<input checked="" type="checkbox"/> Manager	Name:	FSI, Inc.		<input type="checkbox"/> Manager	Name:	Jeffrey J. Liegel, Trustee	
<input type="checkbox"/> Member	Address:	2651 Kirking Court		<input checked="" type="checkbox"/> Member	Address:	N8325 Dumke Road	
<input type="checkbox"/> Authorized		Portage, WI 53901		<input type="checkbox"/> Authorized		Portage, WI 53901	
Person				Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:	Chad A. Stevenson, Trustee		<input type="checkbox"/> Manager	Name:		
<input checked="" type="checkbox"/> Member	Address:	N1756 County Road T		<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized		Endeavor, WI 53930		<input type="checkbox"/> Authorized			
Person				Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:			<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:			<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized				<input type="checkbox"/> Authorized			
Person				Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> 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 _____ authorized person
Jeffrey J. Liegel, CEO of FSI, Inc., its Manager

Typed or printed name of signer

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

S & L PROPERTIES LAKEWOOD RANCH 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 May 06, 2022.

I further certify that said corporation or limited liability company has not yet completed its initial report year and, accordingly, has not yet filed an annual report under ss. 180.1622, 180.1921, 181.0214 or 183.0120 Wis. Stats., and that said corporation or limited liability company has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on May 31, 2022.

[Handwritten signature of Michelle Y. Knuese]

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: 332964-E0E03581



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 18, 2022

RICHARD A LATTA
222 WEST WASHINGTON AVENUE STE 900
MADISON, WI 53703 US

SUBJECT: S & L PROPERTIES LAKEWOOD RANCH LLC
Ref. Number: W22000082966

We have received your document for S & L PROPERTIES LAKEWOOD RANCH LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There can only be one officer listed on each section. Please remove one of the officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin
Regulatory Specialist II

Letter Number: 922A00013730

RECEIVED
JUL 05 2022