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(Requestor's Name)				
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COVER LETTER

TO:	Registration S Division of Co					
SUBJI	Manada R	ealty, LLC				
	Name of Limited Liability Company					
The en Exister	closed "Applicati ace, and check are	on by Foreign Limited Liability submitted to register the above	Company for Authorization to Transact Business in Florida, referenced foreign limited liability company to transact business.	," Certifi iness in F	cate of Plorida.	
Please	return all corresp	ondence concerning this matter t	to the following:			
	Matth	new K. Steffes				
			Name of Person	-		
	Mana	da Technologies, Inc.				
	Firm/Company					
	319 Barry Aveue South, Suite 110					
	Address		Address	-	r~7	
	Wayz	ata, Minnesota 55391			2022 DI	
	City/State and Zip Code		City/State and Zip Code	- :: <u></u>	DEC -	
	matthey	w.steffes@manadatech.com			Ϋ́	
		E-mail address: (to be	e used for future annual report notification)	- <u>'</u>		
For fur	ther information	concerning this matter, please ca	II:		ა: 07	
Matthew Steffes		es	651 283-8132 at ()		_	
		Name of Contact Person	Area Code Daytime Telephone Number	•		
Mailing Address: Registration Section			Street Address: Registration Section			
Division of Corporations			Division of Corporations			
P.O. Box 6327			The Centre of Tallahassee			
	Tallahassee.	FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
		neck for the following amount: eck payable to: FLORIDA DEF ng Fee	e & 🗆 \$155.00 Filing Fee & 🗆 \$160.00 Filing Fee.			

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: Manada Realty, 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.") Minnesota (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) 11/1/2022 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 1180 Celebration Boulevard 319 Barry Avenue South 6. (Mailing Address) (Street Address of Principal Office) Suite 180 Suite 110 Celebration, FL 34747 Wayzata, MN 55391 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Matthew K. Steffes Name: 1180 Celebration Boulevard Office Address: Celebration (City)

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:	Title or Capacity:	Name and Address:	
■Manager	Name:	■Manager	Name: Reed J. Mandel	
□Member	Address: 1180 Celebration Boulevard	□Member	Address:	
□Authorized	Suite 180	□Authorized	Suite 110	
Person	Celebration, FL 34747	Person	Wayzata, MN 55391	
Other	Other	□Other	Other	
■Manager	Name:	□Manager	Name:	
□Member	Address: 319 Barry Avenue South	□Member	Address:S19 Barry Avenue South	
□Authorized	Suite 110	■Authorized	Suite 110	
Person	Wayzata, MN 55391	Person	Wayzata, MN 55391	
□Other	Other	□Other	□Other : 29	
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person	7	
□Other	Other	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

Matthew K. Steffes

Typed or printed name of signee

Office of the Minnesota Secretary of State Certificate of Good Standing

I, Steve Simon, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:

Manada Realty, LLC

Date Filed:

12/07/2021

File Number:

1276222700024

Minnesota Statutes, Chapter:

322C

Home Jurisdiction:

Minnesota

This certificate has been issued on:

12/02/2022



Atere Pimm

Steve Simon

Secretary of State
State of Minnesota