M23000008514

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	are)	
(Addi	C33)	
<u> </u>		
(City/	State/Zip/Phone #))
PICK-UP	WAIT	MAIL
/Rusi	ness Entity Name)	· · ·
(003)	ness Entity Name,	
(Docu	ument Number)	
Certified Copies	Certificates of	Status
···		
Special Instructions to Fi	ling Officer:	
MEBUI	SULLY)	ا ۱۱
		

Office Use Only



300405179453

04/03/23--01023--005 **125.00

2023 JUN 30 PM 2: 38 SECRETARY OF SMAFE FALL ANASSEE, FLORRES

APPROVED AND FILED

K' Buimpt≠A

April 20, 2023

MICHAEL P. GROTH N58 W6181 COLUMBIA ROAD CEDARBURG, WI 53012

SUBJECT: GROTH GROUP, LLC Ref. Number: W23000057817

We have received your document for GROTH GROUP, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

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) 245-6053.

Yvette Scott Supervisor

www.sunbiz.org

Letter Number: 123A00008880

COVER LETTER

TO:	Registration Sec Division of Corp				
SUBJE	Groth Grou				
SUBJE	CT:	Name	of Limited Liability Con	mpany	
The enc Existence	losed "Applicatio ce, and check are	n by Foreign Limited Liability C submitted to register the above r	Company for Authorization of the Company for Authorization of the Company of the	on to Transact Business in Florida." Certificate o I liability company to transact business in Florida	
Please r	eturn all correspo	ndence concerning this matter to	the following:		
	Michae	el P Groth			
			Name of Person		
	Groth (Group, LLC			
			Firm/Company		
	N58 W	6181 Columbia Road			
			Address		
	Cedart	ourg, WI 53012			
		Ci	ty/State and Zip Code		
	accounti	ng@gdg-architects.com			
		E-mail address: (to be	used for future annual re	eport notification)	
For furt	ther information e	oncerning this matter, please cal	i :		
Susan Hauschel		262 at ()	377-8001		
		Name of Contact Person	Area Code	Daytime Telephone Number	
Mailing Address: Registration Section		Street Address: Registration Sec	etion		
Division of Corporations		Division of Corporations			
	P.O. Box 6327		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
	Tallahassee, l	FL 32314	Tallahassee, FL		
	Enclosed is a ch Please make che ## \$125.00 Filin	eck for the following amount: sek payable to: FLORIDA DEP ng Fee	e & 🔠 \$155.00 Filir	ig Fee & 🔲 \$160.00 Filing Fee, Certificate	

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:

Groth Architectural G	ame adopted for the purpose of transacting business in Flo	orida. The alternate name must i	nclude "Limited Liabil	ity Company," "L.L.C," or	 LLC.")
Wisconsin 2. (Jurisdiction under the law of which foreign limited hability company is organized)		39-1810137			
1/2/2023					
·	(Date first transacted business in Florida, if prior to r (See sections 605.0904 & 605.0905, F.S. to determine	egistration.) ne penalty liability)			
N58 W6181 Columbia	Rd.	6			
). Street Address of Principal Office)		(Mailing Add	ress)		
Cedarburg, WI 53012					
			•+•	- 2	_
					
7. Name and street addres	s of Florida registered agent: (P.O. Box	NOT acceptable)		CRETAI LAITAS	ر تر
7. Name and street addres Name:	is of Florida registered agent: (P.O. Box InCorp Services, Inc.	NOT acceptable)		30 PM	FILED
		NOT acceptable)		30 3877 0 3887 0	FILED

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.

Taylor Santizo Taylor Santizo on behalf of InCorp Services, Inc.
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]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name: Michael P Groth Name: ______ □ Manager □Manager N58 W6181 Columbia Rd. Address: _ Address: _______ □Member ■Member Cedarburg, WI 53012 □ Authorized □ Authorized Person Person □Other ____ □Other □Other ______ □Other Name: ______ □Manager Name: ______ □Manager Address: _____ ∐Member □Member Address: ☐ Authorized ☐ Authorized Person Person □Other_____ □Other_____ □Other _____ Other ____ Name: _____ □Manager Name: ______ □Manager □Member Address: _______ Address: _____ □Member □ Authorized ☐ Authorized Person Person □Other_____ □Other______ □Other____ □Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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.

Typed or printed name of signee

Michael P Groth

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, Craig Heilman, Administrator of the Division of Corporate and Consumer Services. Department of Financial Institutions, do hereby certify that

GROTH GROUP, 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 31, 2006.

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 183.0212 Wis. Stats., but that it has not filed a statement or articles of dissolution.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department on February 17, 2023.

CRAIG HEILMAN, 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:

354661-0BBB32EA