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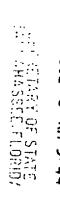
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer.				
Reid 3				
W23000085466				

Office Use Only



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M. SOLOMON

JUL 14 2023

COVER LETTER

SHR HZ	TaDah LandMark DoS LLC					
OBJEC	JBJECT: Name of Limited Liability Company					
he enclo Existence,	sed "Application by Foreign Limited Liability C , and check are submitted to register the above r	Company for Authorization to Transact Business in Florida eferenced foreign limited liability company to transact bus	," Certificate iness in Flori			
lease ren	nrn all correspondence concerning this matter to	the following:				
	Tammy Thiel					
		Name of Person	-			
	TaDah LandMark DoS 4.LC					
	Firm/Company					
	6040 143rd Lane NW					
		Address	2023			
	Ramsey, MN 55303		2029 JUL -5 SELAGIAN PERANASS			
	Ci	ty/State and Zip Code	-885 - 6			
	dance678go@aol.com		7 A			
	E-mail address: (to be	used for future annual report notification)	AH 9: 44 DE STATE			
or furthe	r information concerning this matter, please call	l:	Öm 🗜			
Tammy Thiel		612 2987291				
_	Name of Contact Person	Area Code Daytime Telephone Number	-			
_	Mailing Address:	Street Address:				
Registration Section		Registration Section				
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division of Corporations				
		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810				
'	ratianassee, the 52514	Tallahassee, FL 32303				

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

IN COMPLIANCE WITH SECTION (05.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. TaDah LandMark DoS LLC (Name of Foreign Limited Liability Company; must include "Limited")	Liability Company," "L.L.C.," or "Ll.C.")	
(If name imavailable, enter alternate name adopted for the purpose of transacting business in Flo	rida. The alternate name must include "Limited Lik	ibility Company," "L. L., C," or "E.L.C.")
Minnesota 2.	93-1377371 3. (FEI number	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI numbe	er, if applicable)
06/15/2023 4.		
(Date first transacted business in Florida, if prior to re (See sections 605,0904 & 605,0905, F.S. to determin	egistration.) e penalty liability)	
1914 Cape Coral Parkway W 5.	6040 143rd Lane NW	
5. (Street Address of Principal Office)	6. (Mailing Address)	
Cape Coral, FL 33914	Ramsey, MN 55303	
		2023
7. Name and street address of Florida registered agent: (P.O. Box Name: Tammy Thiel		MINAN OF STATE
Name: Tammy Thiel Office Address: 1914 Cape Coral Parkus Cape Coral (City)	ey w	
Registered agent's acceptance: Having been named as registered agent and to accept service of p designated in this application, I hereby accept the appointment as to comply with the provisions of all statutes relative to the proper and accept the obligations of my position as registered agent.	rocess for the above stated limited is registered agent and agree to act i	liability company at the place in this capacity. I further agive

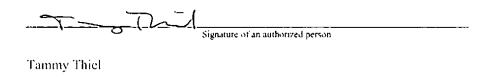
(Registered agent) signature)

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: Tammy Thiel	□Manager	Name: Deborah Thiel	
■Member	Address: 6040 143rd Lane NW	■Member	Address:	
Authorized	Ramsey, MN 55303	■ Authorized	Elk River, MN 55330	
Person		Person		
□Other	Other	□Other	Other	
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		☐Authorized		
Person		Person	2023	
□Other	Other	□Other		
			mon A I	
□Manager	Name:	□Manager	Name: Dri t	
□Member	Address:	□Member	Address:	
□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. 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.



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: TaDah LandMark DoS LLC

Date Filed: 05/06/2023

File Number: 1390268500020

Minnesota Statutes, Chapter: 322C

Home Jurisdiction: Minnesota

This certificate has been issued on: 06/27/2023

Steve Simon
Secretary of State
State of Minnesota



June 19, 2023

TAMMY THIEL 6040 143RD LANE NW RAMSEY, MN 55303 US

SUBJECT: TADAH LANDMARK DOS, LLC

Ref. Number: W23000085466

We have received your document for TADAH LANDMARK DOS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Corey Pettway Regulatory Specialist II

RECEIVED

Letter Number: 223A00013801