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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name : NORTON, HAMMERSLEY, LOPEZ & SKOKOS, P.A. Account Number : I20010000202 Phone : (941)954-4691 Fax Number : (941)954-2128

o, E	Email Address:CURPURATION@NHLSL	AW.COM	006]
L: 22 ATTOHS				CORDERCO CARTONIA II
	Foreign Limited Liability Company WEST BAY 1, LLC		PH 3:	
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	Certified Copy	0		
	Page Count	03		
	Estimated Charge	\$125.00		

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2023



COVER LETTER

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TO: Registration Section Division of Corporations

WEST BAY 1, 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:

JOHN M. COMPTON

Name of Person

NORTON HAMMERSLEY LOPEZ & SKOKOS

Firm/Company

1819 MAIN STREET, SUITE 610.

Address

SARASOTA, FL 34236

City/State and Zip Code

CORPORATION@NHLSLAW.COM

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

For further information concerning this matter, please call:

SARAH DAVIS		94) at ()	954-4691		
Name	of Contact Person	Area Code	Daytime Telephone Number		
MAILING ADDRESS	MAILING ADDRESS:		STREET ADDRESS:		
Division of Corporations		Division of Corporations			
Registration Section	Registration Section P.O. Box 6327		Registration Section Clifton Building		
P.O. Box 6327					
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301			
					Enclosed is a check for the follow
🖬 \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing I Certified Copy	Fee & DS160.00 Filing Fee, Certificate of Status & Certified Copy		

From: GFI FaxMaker #230003648203

To: *9319*9000#1*18506176383

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:

I. WEST BAY I, LLC

(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.")

Ofr	ame unavailable, enter alternate r	name adopted for the purpose of transacting business in Flo	rida. The alternate name must include "Limited	Liability Company," "L.L.C," or "LLC.")	
2	ILLINOIS		3. applied for		
		high foreign limited liability company is organized)		number, if applicable)	
4	OCTOBER 18, 2023				
ч.		(Date first transacted business in Florida, if prior to a (See sections 605,0904 & 605,0905, F.S. to determine	registration) ne penalty limbility)		
5.	4336 HIGHWAY 162		6 4336 HIGHWAY 162		
(Street Address of Principal Office) GRANITE CITY, IL 62062		, .	(Mailing Address) GRANITE CITY, IL 62062		
7.	Name and street addres	ss of Florida registered agent: (P.O. Box	NOT acceptable)		
•					
	Name:	John M. Compton			
	Office Address:	1819 Main Street Suite 610			
		Sarasota	, Florida <u>34236</u>		
(Cny)				code)	
	gistered agent's accep		and a shear the state of the st	and the definition of the second s	
des	ignated in this applica	gistered agent and to accept service of p tion, I hereby accept the appointment as	s registered agent and agree to a	iea naonny company at the place ict in this capacity. I further agree	
10 0	comply with the provisi	ons of all statytes relative to the proper	and complete performance of n	ty duties, and I am familiar with	
anc	t accept the obligation.	s of my position as registered agent.		023 10	
		- C/w/L-		í g m	
		(Registered agent's s	ngnalare)		
8.	The name, title or capa	icity and address of the person(s) who has	s/have authority to manage is/are		
	Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:	
	MEMBER	Ryan Fischer	MEMBER	Kelly Fischer	
		133 Stonebridge Crossing Driv		133 Stonebridge Crossing Dri	
		Maryville, Illinois 62062		Maryville, Illings 62062	
	MEMBER	Mark Crays, as the trustee	MEMBER	Ashley Crays, as the trustee	
		5297 Millenium Court		5297 Millenium Court	
		Edwardsville, IL 62025	_	Edwardsville, IL 62025	

(Use attachments if necessary)

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

JOHN M. COMPTON

Typed or printed name of signee

From: GFI FaxMaker To: *9319*9000#1*18506176383 Page: 6/6 Date 10/18/2023 3:35:05 PM ガンびいつうしゅんよういう

File Number 1320102-1



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the

Department of Business Services. I certify that

WEST BAY I, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MAY 02, 2023, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 18TH day of OCTOBER A.D. 2023.

Authentication #: 2329102600 verifiable until 10/18/2024 Authenticate at: https://www.ilsos.gov

SECRETARY OF STATE