# M06000001318

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W06-5982 4 BRYM FEB - 7 2006

### COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Specially Service Solutions (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:
Angela Graf (Name of Person)
(Name of Person)  Specialty Service Solutions  (Firm/Company)
6321 N. Avondale Ave. Shite 103 (Address)
Chicago, Il 60631 (City/State and Zip Code)
For further information concerning this matter, please call:
Angela Graf at (773) 774-1229  (Name of Person) (Area Code & Daytime Telephone Number)
MAILING ADDRESS:  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314  STREET ADDRESS:  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301
Enclosed is a check for the following amount:  \$\Begin{align*} \Boxed{1}\\$ 125.00 \text{ Filing Fee} \text{ Fee, Certificate of Status} \text{ Certified Copy} \text{ of Status & Certified Copy} \text{ S160.00 \text{ Filing Fee, Certified Copy} \text{ Certified Copy} \text{ Of Status & Certified Copy} \text{ OF Status & Certified Copy} \text{ Certified Copy} \text{ OF Status & Certified Copy}



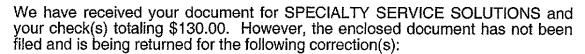
#### FLORIDA DEPARTMENT OF STATE Division of Corporations

February 7, 2006

ANGELA GRAF SPECIALTY SERVICE SOLUTIONS 6321 N. AVONDALE AVE. SUITE 103 CHICAGO, IL 60631

SUBJECT: SPECIALTY SERVICE SOLUTIONS

Ref. Number: W06000005982



The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

We didn't receive the 2nd page of application listing Registered Agent,

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) 245-6043.

Letter Number: 906A00008913

Joey Bryan Document Specialist 2006 MAR -3 PM 2: 03
PALLAHASSEE, FLORIDA

#### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: Specialty Service Solutions	s, LLC	
(Name o	f Limited Liability Company)	•
	ed Liability Company for Authorization to Transact are submitted to register the above referenced foreignida	
Please return all correspondence concerning	this matter to the following:	
Angela Graf		2006
	(Name of Person)	蓋丁
Specialty Service Solution	(Name of Person)  Ons, LLC  (Firm/Company)  FLORIDA  (P. Suite 103	FILED 2006 MAR -3 PM 2: 03
	(Firm/Company)	
	OR	,,,
6321 N. Avondale Av	/e., Suite 103	ι <b>ω</b> Σ () ,
	(Address)	`
Chicago, IL 60631		
(C	ity/State and Zip Code)	
For further information concerning this matter	er, please call:	
Angela Graf	at ( 773 ) 774-1229	
(Name of Person)	(Area Code & Daytime Telephone Numb	er)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount  \$\Bigsim \frac{1}{3}\$125.00 Filing Fee  \$\Centrification \frac{1}{3}\$130.00 Filing Fee  Certification of the following amount for the following amount	Fee & \$\Bigcap\$\$ \$155.00 Filing Fee & \$\Bigcap\$\$ \$160.00 Filing Fee, C	Certificate Certified Copy

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

i.	Specialty Service Solutions, LLC	
	(Name of Foreign Limited Liability Company)	
	. Illinois 3. 14-1892694	
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4.	1/28/03 5. Perpetual	
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	-
5.	· · · · · · · · · · · · · · · · · · ·	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	(See sections 608.501 & 608.502 F.S. to determine penalty liability)  6321 N. Avondale Ave., Suite 103  Chicago, IL 60631  (Street Address of Principal Office)	
	Chicago, IL 60631	
	(Street Address of Principal Office)	
3.	If limited liability company is a manager-managed company, check here .	
€.	. The name and usual business addresses of the managing members or managers are as follows:	
	Steven J. Ferguson 6321 N. Avondale Ave., Suite 103 Chicago, IL 60631	
	Daniel R. Kroll 6321 N. Avondale Ave., Suite 103 Chicago, IL 60631	
	Jeffrey J. Kroll 6321 N. Avondale Ave., Suite 103 Chicago, IL 60631	
h	O. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in a foreign language, a constant of the certificate is in a foreign language, a constant of the certificate under eath of the translator must be submitted.)	n
11	Nature of business or purposes to be conducted or promoted in Florida: Insurance	
	Star Me	
	Signature of a member or an authorized representative of a member.	
	(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	

Typed or printed name of signee

Steven J. Ferguson

#### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Specialty Service Solutions, LLC

2. The name and the Florida street address of the registered agent and office are:

HO S. FEDERAL HIGHWAY ENTE 20
Florida Street Address (P.O. BEX NOT ACCEPTABLE)

Deerfield Beach FL 33441
Fire/State/Zin

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

Certified Copy (optional) \$ 30.00

5.00 Certificate of Status (optional)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

SPECIALTY SERVICE SOLUTIONS, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JULY 30, 2003, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT BUSINESS 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

21ST

day of FEBRUARY A.D. 2006

Desse White