Division of Corporations Electronic Filing Cover Sheet

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(((H110002169973)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

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Foreign Limited Liability Company 1190 South State Road Seven, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

B. BOSTICK

SEP 6 2011

EXAMINER 9/1/2011



September 2, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION

SUBJECT: 1190 SOUTH STATE ROAD SEVEN LLC

REF: W11000045507

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal 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) 245-6097.

Jeraline Saulsberry Regulatory Specialist II FAX Aud. #: H11000216997 Letter Number: 311A00020470

11 SEP -2 AH 10: 03
SECARE IN THE STATE
ALLAHASSEE, FLORIDA

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

IN COMPLIANCE WITH SECTION 605503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREKIN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Of name unavailable, enter alternate name adopted for the purpose of transacting business in Florida an	nd attach a copy of the written
consent of the managers or managing members adopting the alternate name. The alternate name must be Company of "L.L.C." (LL.C.")	notude "Limited Liability
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 27-3677378 (I EI number, if application application and application application application and application)cable)
4. 10/15/2010 (Date of Organization) 5. Perpetual (Duration: Year limited liability or exist or "perpetual")	ompany will cease to
6. February 1, 2011	Direction of Commence of the C
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 7000 West Palmetto Park Road	inne e i haffande killedekillendekillendekillen e innaps - delektiv en maj it kap i du killende e
Boca Raton, Florida 33433	
(Street Address of Principa) Office)	E F TI
8. If limited liability company is a manager-managed company, check here 🗹	CO PO PO PORTO
9. The name and usual business addresses of the managing members or managers are	as follows:
Satriale's, LLC, a Delaware limited liability company, Manager	<u> </u>
P.O. Box 4331, Lisle, Illinois 60532	03 11E 110 A
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a translation of the certificate under oath of the translation must be submitted.)	
11. Nature of business or purposes to be conducted or promoted in Florida: Investme	ent
Signature of a member or an authorized representative of a mem	
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirm penalties of perjury that the facts stated herein are true. I am aware that any false information document to the Department of State constitutes a third degree felony as provided for it	n submitted in a

Stuart R. Morris, Esq., Authorized Representative
Typed or printed name of signee

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.

If unavailable, the al	ternate to be used in th	e state of Florida is:	
2. The name and the	Florida street address	of the registered agent and office are:	
CT	Corporation		
<u> </u>		(Name)	
120	0 South Pine Islar	nd Road	
	Florida Street Add	dress (P.O. Box NOT ACCEPTABLE)	
Ft.	Lauderdale	_{FL} 33324	

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 um familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Madorina Cuddihy
Special Assistant Secretary

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

H SEP -2 AM 10: 03

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "1190 SOUTH STATE ROAD SEVEN, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF SEPTEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

8300

110972141

AUTHENTYCATION: 9004593

DATE: 09-01-11