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#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

COOKE YOEZLE L

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:

LISA GASPERO, ESQ.

Name of Person

GASPERO & GASPERO, ATTORNEYS AT LAW, P.C.

Firm/Company

4300 COMMERCE CT., SUITE 315

Address

LISLE, IL 60532

City/State and Zip Code

LISA@GASPEROLAW.COM

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

For further information concerning this matter, please call:

LISA GASPERO, ESQ.

630

687-9700

Name of Contact Person

Area Code

Daytime Telephone Number

#### **MAILING ADDRESS:**

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

#### STREET ADDRESS:

Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

□ \$125.00 Filing Fee

□ \$130.00 Filing Fee & Certificate of Status

□ \$155.00 Filing Fee & Certified Copy

■ \$160.00 Filing Fee, Certificate of Status & Certified Copy



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 16, 2014

LISA GASPERO, ESQ. GASPERO & GASPERO, ATTORNEYS AT LAW, P.C 4300 COMMERCE CT., SUITE 315 LISLE, IL 60532

SUBJECT: COOKE YOEZLE LLC Ref. Number: W14000074785

We have received your document for COOKE YOEZLE 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):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 214A00026586

## 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:

(If name unavailable, enter alternate name add	opted for the purpose of tran	sacting business in Florida. The	alternate name must	include "Lim
Liability Company," "L.L.C," or "LLC.")	·	_		Division Line
2. ILLINOIS		47-2294556		
(Jurisdiction under the law of which foreign company is organized)	n limited liability	(FEI number	er, if applicable)	三百万
4. N/A				
(Date fi (See sectio	irst transacted business in Fl ons 605.0904 & 605.0905, F	orida, if prior to registration.) .S. to determine penalty liability	)	
, 7821 EDGEWATER DR				
V				
	(Street Address o	f Principal Office)	·	<u> </u>
6. GASPERO & GA	:	• •	AT LAW,	P.C.
4300 COMMERC	CE CT. SUI	TF 315   USL	F II 60	532
		Address)	<del></del>	
7. The name, title or capacity and	address of the nerso	n(s) who has/have autho	rity to manage i	ic/are:
			ity to manage i	S/arc.
MICHAEL J. COOI	NE, PAULA	TOEZLE, M	arager	
			Ŭ	
8. Attached is an original certificat	te of existence, no mo	ore than 90 days old, duly	y authenticated	by the offic
having custody of records in the ju				
acceptable. If the certificate is in a must be submitted)	foreign language, a t	ranslation of the certifica	ite under oath o	if the transl
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	<i>/</i> ) // / /	/ <b>/</b>		

Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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	e of the Limited Liability Company is:	
	# Cooke Hoerle LLC	
If unavailabl	le, the alternate to be used in the state of Florida is:	
2. The name	e and the Florida street address of the registered agent and office are:	2015 FEB SECRET
	C T Corporation System	表現。一
	(Name)	
	1200 South Pine Island Road	mark & Co
	Fiorida Street Address (P.O. Box NOT ACCEPTABLE)	3: 29 ORIU4
	Plantation FL 33324	•
	City/State/Zip	

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 605, Florida Statutes.

By: C T Corporation System Bernadette Baker
(Signature) Assistant Secretary

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

over, the confidence of the co

FL057 - 01/16/2014 Welters Kluwer Online

File Number

0502883-3



### To all to whom these Presents Shall Come, Greeting:

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

COOKE YOEZLE LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON NOVEMBER 11, 2014, 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.



Authentication #: 1503501728

Authenticate at: http://www.cyberdriveillinois.com

## In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 4TH

day of FEBRUARY

A.D.

2015

Desse White

SECRETARY OF STATE