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NAME:

SAYERS TECHNOLOGY, LLC

TYPE OF FILING: AUTHORIZATION FOR AUTHORITY

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

abie #

COVER LETTER

Divisi	on of Corporations	
SUBJECT:	Sayers Technology, LLC	
505000.	Name of Limited Liability Company	
The enclosed " Existence, and	Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certifulation company to transact business in Florida, in Certifulation and the company to transact business in	ficate of Florida
Please return a	correspondence concerning this matter to the following:	
	James V. Martin	
	Name of Person	
	Sayers Technology, LLC	
	Firm/Company	
	825 Corporate Woods Parkway	
	Address	
	Vernon Hills, Illinois 60061	_
	City/State and Zip Code	1
	jmartin@sayers.com	
	E-mail address: (to be used for future annual report notification)	. 1
For further info	rmation concerning this matter, please call:	
	James V. Martin at (800) 323-5357	-
	Name of Contact Person Area Code Daytime Telephone Number	71
Divisi Regist P.O. E	ING ADDRESS: on of Corporations Division of Corporations ration Section Ox 6327 Clifton Building assee, Fl. 32314 C661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a	check for the following amount: 5.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status Certificate of Status	Me

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: Sayers Technology, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter atternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LL.C," or "LLC.") 2. Dusawar w (Jurisdiction under the law of which foreign limited liability Delaware 47-3141339 (FEI member, l'applicable) company is organized) not applicable (Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine presently liability) 825 Corporate Woods Parkway Vernon Hills, Illinois 60061 (Street Address of Principal Office) **825 Corporate Woods Parkway** Vernon Hills, Illinois 60061 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are James V. Martin is the Manager with the following address: 825 Corporate Woods Parkway, Vernon Hills, Illinois 60061 8. Attached is an original 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. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an authorized person (In accordance with section 605.0203, P.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am ewere that any false information submitted in a document to the Department of State constitutes a third degree falsoy as provided for in a.817.155, P.S.) James V. Martin Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.01 13 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 of the	Sayers Techno	ology, LLC	
If unavailable, the	alternate to be used in the state of F	Florida is:	
2. The name and	the Florida street address of the regi	stered agent and office are:	
National Corporate Research, Ltd., Inc.		SECRE I	
155 Office Plaza Drive		第 - 2 1 - 3 1 - 3	
Florida Street Address (P.O. Box NOT ACCEPTABLE)			
		32301	
_	Florida Street Address (P.O. E	BOX NOT ACCEPTABLE) 232301	

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.

Cuthing & howly, VPOJNCR (Signature)

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

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SAYERS TECHNOLOGY, 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 EIGHTEENTH DAY OF FEBRUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SAYERS TECHNOLOGY, LLC" WAS FORMED ON THE THIRTEENTH DAY OF FEBRUARY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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AUTHENTY CATION: 2126971

DATE: 02-18-15

You may varify this certificate online at corp.delaware.gov/authver.shtml