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| Special instructions to F | iling Officer. | | | |
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TRANSMITTAL LETTER

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| TO: | Registration Division of | Section Corporations | | | | 101 - 3 P 3 58 | | |
|------------------------------|--|---|------------------------------|---------------------|---|-----------------------|--------------------------------------|----------------------|
| SUBJ | FCT· | STRATEGIC REAL | ESTATE S | ERVICE | S CORP. | MIT | | il in |
| SCDG | Ec | (Nan | ne of corpora | tion - m | ust include suff | | | |
| Dear S | ir or Madam: | | | | | | | |
| "Certif | sclosed "Appl ficate of Exist sact business | ication by Foreign C ence", and check are in Florida. | Corporation for submitted to | or Auth o regist | orization to Trar er the above refe | sact Bus renced fo | iness in F oreign con | lorida", poration |
| Please | return all cor | respondence concer | ning this mat | ter to th | e following: | | | |
| | | Stephen M | . Leonar | d | | | | |
| | | | (Name | of Pers | on) | | | |
| | | Strategic | | tate Compan | Services (y) | Corp. | | |
| | | Two North | field Pl | aza | Suite 320 |) | _ | |
| | | | (Ac | idress) | | | | |
| | | Northfiel | d, IL 60 | 093 | | | | |
| | | | (City/Stat | e and Z | ip code) | | | |
| For fur | ther informat | ion concerning this | matter, pleas | e call: | | | | |
| J | im Ostro | wski | at (847 |) | 784-1660 | | | |
| | (Name of P | erson) | | a Code | & Daytime Tele | phone Nu | ımber) | |
| | | | | | | | | |
| Registr Divisio 409 E. | et ADDRES ration Section on of Corporat Gaines St. assee, FL 323 | ions | | Reg Div P.O | ILING ADDRI istration Section ision of Corpora . Box 6327 lahassee, FL 32 | ı itions | | |
| Enclose | ed is a check : | for the following an | iount: | | | | | |
| Ģ \$70. | .00 Filing Fee | \$78.75 Filir Certificate | _ | | .75 Filing Fee & tified Copy | (| 87.50 Fil Certificat Certified | e of Status & |

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. STRATEGIC REAL ESTATE SERVICES CORP. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) Illinois (State or country under the law of which it is incorporated) (FEI number, if applicable) 08/10/2000 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502 F.S. to determine penalty liability) Two Northfield Plaza Suite 320 Northfield, IL 60093 (Principal office address) Two Northfield Plaza Suite 320 Northfield, IL 60093 (Current mailing address) Commercial Real Estate (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Mark Fintel Name: 11417 Ohanu Office Address: Boyton Beach

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

12/20/04

(City)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

| 12. Names and business addresses of officers and/or directed | ors: |
|---|---|
| A. DIRECTORS | , |
| Chairman: | |
| Address: | * (.) |
| | \$15 JP 3:58 |
| Vice Chairman: | ENTER A CONTRACTOR |
| Address: | |
| | |
| Director: | · |
| Address: | |
| | |
| Director: | |
| Address: | |
| | |
| | |
| B. OFFICERS | |
| | |
| Address: Two Northfield Plaza Suite | 320 |
| Northfield, IL 60093 | |
| /ice President: | |
| Address: | |
| | |
| ecretary:Deena Leonard | |
| Address: Two Northfield Plaza Suite 3 | Northfield, IL 60093 |
| Teasurer: | |
| Address: | |
| | |
| NOTE: If necessary, you may attach an addendum to the ap | plication listing additional officers and/or directors. |
| 3. Signature of Director or Officer lister | in number 12 of the application) |
| (Signature of Director or Officer lister 4. STEPHEN M. LEWARD | an number 12 of the application) |
| (Typed or printed name and capacity | of person signing application) |

File Number

6119-667-6



To all to whom these Presents Shall Come, Greeting:

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



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this

day of

DECEMBER

A.D.

2004

Desse White

SECRETARY OF STATE