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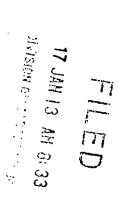
| (Requestor's Name) | | | | | | |
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| PICK-UP | ☐ WAIT | MAIL | | | | |
| (Business Entity Name) | | | | | | |
| (Document Number) | | | | | | |
| Certified Copies | Certificates | s of Status | | | | |
| Special Instructions to Filing Officer: | | | | | | |
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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 463701 4304492

AUTHORIZATION : Oxpublic Miles

COST LIMIT : \$ 70.00

ORDER DATE: January 12, 2017

ORDER TIME: 9:39 AM

ORDER NO. : 463701-025

CUSTOMER NO: 4304492

FOREIGN FILINGS

NAME: KOLBROOK DESIGN, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

| TO: | Registration Section | | | | |
|------------------------------|---|-----------------|--------------------------|----------------------|--|
| | Division of Corporations | | | | |
| | KOLBROOK DESIGN, IN | C. | | | |
| SUBJ | | | | | |
| | Name | of corporation | ı - must i | nclude suffix | |
| Dear S | ir or Madam: | | | | |
| "Certi | iclosed "Application by Foreign C ficate of Existence," or "Certifica referenced foreign corporation to | te of Good Stai | nding" ar | nd check are sub | |
| | return all correspondence concer LIS B. KAPLAN | ning this matte | r to the fo | ollowing: | |
| | | Name of | Person | | |
| DLA I | PIPER LLP (US) | rame or | . 015011 | | |
| - | | Firm/Con | nnany | · | <u> </u> |
| 203 N | LASALLE ST., SUITE 1900 | 7 11111 0011 | припу | | |
| | | Addr | ess | | |
| CHIC | AGO, IL 60601 | | | | |
| | | City/State a | ınd Zip ce | ode | |
| phyllis | .kaplan@dlapiper.com | | | | |
| | E-mail addre | ss: (to be used | for future | annual report i | notification) |
| | E man addiv | oo. (to oc upea | ioi iuiui | o annour report. | ionnouncing |
| For fu | rther information concerning this | matter, please | call: | | |
| PHYLLIS B. KAPLAN | | 312 | 368-2148 | | |
| | | at (|) | | |
| | Name of Person | Area Coo | le | Daytime Telep | hone Number |
| | | | | | |
| | STREET/COURIER ADDRE | SS: | | MAILING A | DDRESS: |
| Registration Section | | | Registration Section | | |
| Division of Corporations | | | Division of Corporations | | |
| Clifton Building | | | P.O. Box 6327 | | |
| 2661 Executive Center Circle | | | Tallahassee, FL 32314 | | |
| | Tallahassee, FL 32301 | | | | |
| Enclos | sed is a check for the following ar | mount: | | | |
| 57 | 0.00 Filing Fee | • | | Filing Fee & ed Copy | ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy |

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. KOLBROOK DESIGN, INC. 1. (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) 27-4824397 2. (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 828 DAVIS ST., STE. 300, EVANSTON, IL 60201 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee (City) 9. 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. Melissa Zender Corporation Service Company Asst. Vice President

10. 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.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Address: __ Vice Chairman: Address: _ STEVEN BROOKS Director: 828 DAVIS ST., SUITE 300, EVANSTON, IL 60201 Address: __ STEVEN KOLBER Director: 828 DAVIS ST., SUITE 300, EVANSTON, IL 60201 Address: _ **B. OFFICERS** STEVEN BROOKS President: 828 DAVIS ST., SUITE 300, EVANSTON, IL 60201 Address: STEVEN KOLBER Vinex President: 828 DAVIS ST., SUITE 300, EVANSTON, IL 60201 Address: STEVEN KOLBER Secretary: 828 DAVIS ST., SUITE 300, EVANSTON, IL 60201 Address: STEVEN BROOKS Treasurer: 828 DAVIS ST., SUITE 300, EVANSTON, IL 60201 Address: _ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. STOOPS Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. STEVEN BROOKS, CO-PRESIDENT 13. ____

(Typed or printed name and capacity of person signing application)

File Number

6777-659-3



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

KOLBROOK DESIGN, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON FEBRUARY 07, 2011, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION 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 12TH day of JANUARY A.D. 2017.

Authentication #: 1701202342 verifiable until 01/12/2018

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

Desse White

SECRETARY OF STATE