# F18000005386

(Requestor's Name)							
(Address)							
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(City/State/Zip/Phone #)							
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PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

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### **COVER LETTER**

	Registration Section Division of Corporations						
CUDIE		EALTY BROKERS,	INC.				
SUBJE	.cr:	Name o	f corporation	- must include suffix			
Dear Sir	or Madam:						
"Certific	cate of Existenc		of Good Stand	Authorization to Transac ding" and check are subress in Florida.			
Please re	-	oondence concernir	ng this matter	to the following:			
			Name of F	Person			
NEW LI	NK ACCESS CO	DRPORATION					
-			Firm/Comp	pany			
1229 N I	NORTH BRANC	H ST STE 101					
			Addre				
CHICAG	GO, IL 60642						
			City/State an	d Zip code			
paul@ne	wlinkaccess.com	ı					
		E-mail address:	(to be used for	or future annual report no	otification)		
For furth	her information	concerning this ma	itter, please ca	all:			
PAUL PERRY		312 at (	440-9343				
	Name of Perso		Area Code	Daytime Teleph	one Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			
Enclose	d is a check for	the following amou	unt:				
<b>570.</b> 6	00 Filing Fee	S78.75 Filing Certificate of		\$78.75 Filing Fee & Certified Copy	■ \$87.50 Filing Fee. Certificate 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.

(If name unavails	able in Florida, enter alternate corporate name ad	ionted for the purpose of transacting business in	Florida)	_	
ILLINOIS	4	5-4307378	, , , , , ,		
(State or countr 01/13/2012 4.	y under the law of which it is incorporated)	(FEI number, if applicable)		-	
	of incurporation)	(Date of duration, if other than perpetua	ai)	-	
	(SEE SECTIONS 607.1501 & 607.150 AVE #H2004 MIAMI, FL 33137 (Principal	2. F.S., to determine penalty liability) office address)		<del>.</del>	
1229 N NORTH	BRANCH ST STE 101 CHICAGO, IL 60642-2		எ	DIS.	
(Current mailing address, if different)  8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)					
Name:	ANGELA ROBINSON		PH	- 20년 - 20년 - 20년	
Office Address:	3470 E COAST AVE #H2004		<b>կ։</b> 23		
	MIAMA	33137 . Florida		<del>et</del>	
	(City)	(Zip code)			
designated in this further agree to c	ent's acceptance: sed as registered agent and to accept service application, I hereby accept the appointme omply with the provisions of all statutes ref amiliar with and accept the obligations of	ent as registered agent and agree to act in ative to the proper and complete performa	this cap	acity. I	

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: Vice Chairman: ANGELA ROBINSON Director: 3470 E COAST AVE #H2004 MIAMI, FL 33137 Address: \_ Director: \_ **B. OFFICERS** ANGELA ROBINSON 3470 E COAST AVE #H2004 MIAMI, FL 33137 Address: \_ ANGELA ROBINSON Secretary: 3470 E COAST AVE #H2004 MIAMI, FL 33137 ANGELA ROBINSON Treasurer: 3470 E COAST AVE #H2004 MIAMI, FL 33137 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. 13. ANGELA ROBINSON, PRESIDENT

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

#### File Number

6831-146-2



## 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

ELITE REALTY BROKERS. INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 13, 2012, 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 29TH day of OCTOBER A.D. 2018.

Authentication #: 1830202522 verifiable until 10/29/2019
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE