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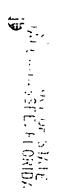
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### COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: SHAFTOWN REALTY	GROUP, INC.		
		must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign "Certificate of Existence," or "Certific above referenced foreign corporation to	ate of Good Stand	ing" and check are subr	
Please return all correspondence conce	erning this matter t	o the following:	
Allison L. Naylor, Esq.			
	Name of P	erson	
Northstone Law LLC			
	Firm/Comp	pany	
1016 W. Jackson Blvd., Suite 509			
	Addres	SS	
Chicago, IL 60607			
	City/State an	d Zip code	
allison@northstone.law			
E-mail add	ress: (to be used fo	r future annual report n	otification)
For further information concerning this	is matter, please ca	11:	
Allison L. Naylor, Esq.	at (	) 361-0131 Daytime Teleph	
Name of Person	Area Code	Daytime Teleph	none Number
STREET/COURIER ADDR Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, Fl. 32303		LING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, Fl	orporations
Enclosed is a check for the following Please make check payable to: FLORIDA  S70.00 Filing Fee  Certification	A DEPARTMENT (	OF STATE \$78.75 Filing Fee & Certified 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.

poration; must include "INCORPORATED. p." "Inc," "Co," or "Corp.")	." "COMPANY." "CORPORATIC	ON,"	
le in Florida, enter alternate corporate name	adopted for the purpose of transacti	ing business in Florida)	
3	26-3582972		
under the law of which it is incorporated)	(FEI number, if a	pplicable)	
5.			
fincorporation)	(Date of duration, if other	(Date of duration, if other than perpetual)	
(SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liabi	lity)	
nue, Suite 400, Chicago, IL 60614			
(Principal off	ice street address)		
(Current maili	ng address, if different)		
address of Florida registered agent: (P.C Shai Wolkowicki	O. Box <u>NOT</u> acceptable)		
9820 Rennes Lane			
Delray Beach	Florida	2022 AUG 1	
(City)	(Zip code)	<u> </u>	
l as registered agent and to accept serv pplication, I hereby accept the appoint nply with the provisions of all statutes i	ment as registered agent and ag relative to the proper and compl	ed corporation at the pla ree to act in this Eupach	
	de in Florida, enter alternate corporate name  3. under the law of which it is incorporated)  (Date first transacted business i (SEE SECTIONS 607.1501 & 6	de in Florida, enter alternate corporate name adopted for the purpose of transaction 3. 26-3582972  Jander the law of which it is incorporated) (FEI number, if a second fine part of the second fine of duration, if other second first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liable seque. Suite 400, Chicago, IL 60614  (Principal office street address) enue. Suite 400, Chicago, IL 60614  (Current mailing address, if different)  address of Florida registered agent: (P.O. Box NOT acceptable)  Shai Wolkowicki  9820 Rennes Lane  Delray Beach  Florida 33446  (Zip code)	

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.

#### A. DIRECTORS Shai Wolkowicki · 🔳 Chairman Name: □ Chairman Name: □Vice Chairman Address: \_\_\_\_\_\_ □ Vice Chairman Address: \_\_\_\_\_\_ Shai Wolkowicki Director □ Director Shai Wolkowicki □President President □ Vice President ☐Treasurer □ Secretary ☐Treasurer □ Secretary □Other \_\_\_\_\_ □ Other \_\_\_\_\_\_ □Other \_\_\_\_\_\_ ☐Other \_\_\_\_\_ □ Chairman □ Chairman Name: \_\_\_\_ Name: \_\_\_\_\_ □Vice Chairman Address: \_\_\_\_\_ □ Vice Chairman Address: \_\_\_\_ \_\_\_ □ Director □Director □ President □President □Vice President \_\_\_\_\_ □Vice President □ Secretary □Treasurer ☐ Secretary □ Treasurer □Other\_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_\_ □Other \_\_\_\_\_ Name; ☐Chairman Name: \_\_\_\_\_ □ Chairman □ Vice Chairman Address: \_\_\_\_\_ □ Vice Chairman Address: □Director □ Director □President □President □Vice President \_\_\_\_\_ ☐ Vice President □ Secretary □ Treasurer □ Secretary □Treasurer Other\_\_\_\_ □Other\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_ \_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 12. Thai Wolknwicki 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 talse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Shai Wolkowicki, its President

#### File Number

6681-989-2



## 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

SHAI TOWN REALTY GROUP, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 22, 2008, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, 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 10TH day of AUGUST A.D. 2022 .

Authentication #: 2222202016 verifiable until 08/10/2023

Authenticate at: https://www.ilsos.gov

Desse White

SECRETARY OF STATE