# F24000004400

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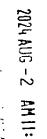




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APPROYED

## **CORPORATE** ACCESS,

## When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

## WALK IN

	PICK UP	MISTY 8/21
XX	CERTIFIED COPY	
	РНОТОСОРУ	
	CUS	
XX	FILING	FOREIGN INC
1.	GRASSMERE FARM DEVEL	
	(CORPORATE NAME AND DOCUMEN	Ϋ́Γ#)
2.	(CORPORATE NAME AND DOCUMEN	· ···································
3.		
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	(CORPORATE NAME AND DOCUMEN	Υ΄Γ #)
6.	(CORPORATE NAME AND DOCUMEN	T #)
SPECIAI	L INSTRUCTIONS:	

# 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.

	,	e adopted for the purpose of transacting	ng business in Florida)
llinois		36-3704837	
	ry under the law of which it is incorporated)	(FEI number, if ap	oplicable)
pril 20, 1990		i.	
(Dat	e of incorporation)	(Date of duration, if other	than perpetual)
S. Wynstone	Park Drive, N. Barrington IL 60010	1502, F.S., to determine penalty liabil	ity)
	(Principal of	fice street address)	
		<u></u>	
<del></del>			
<del></del>		ing address, if different)	
ame and ctea	(Current mail	ing address, if different)	
ame and stre	(Current mail et address of Florida registered agent: (P.	ing address, if different)	2021
lame and <u>stre</u> Name:	(Current mail	ing address, if different)	2024 AU
Name:	(Current mail et address of Florida registered agent: (P.	ing address, if different)	2024 AUG -
Name:	(Current mail et address of Florida registered agent: (P. Bolanos Truxton, P.A. 12800 University Drive, Suite 350	ing address, if different)	2024 AUG - 2
Name:	(Current mail et address of Florida registered agent: (P. Bolanos Truxton, P.A. 12800 University Drive, Suite 350 Fort Myers	ing address, if different) O. Box NOT acceptable), Florida 33907	2024 AUG - 2 AM
	(Current mail et address of Florida registered agent: (P. Bolanos Truxton, P.A. 12800 University Drive, Suite 350	ing address, if different)  O. Box NOT acceptable)	2024 AUG -2 AM 11:
Name: ce Address: degistered ag	(Current mail et address of Florida registered agent: (P. Bolanos Truxton, P.A. 12800 University Drive, Suite 350  Fort Myers  (City)	ing address, if different)  O. Box NOT acceptable) , Florida 33907 (Zip code)	2024 AUG - 2 AM II: 13
Name: ee Address: egistered ag ing been nan	(Current mail et address of Florida registered agent: (P. Bolanos Truxton, P.A.  12800 University Drive, Suite 350  Fort Myers  (City)  gent's acceptance: med as registered agent and to accept serv	O. Box NOT acceptable)  , Florida 33907 (Zip code)	2024 AUG - 2 AH II: 13 the decorporation at the
Name: e Address: egistered ag ng been nan nated in this	(Current mail et address of Florida registered agent: (P. Bolanos Truxton, P.A. 12800 University Drive, Suite 350 Fort Myers (City)	O. Box NOT acceptable)  , Florida 33907 (Zip code)	ee to act in this can

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

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

#### · A. DIRECTORS Daniel B. Light Wade B. Light Name: □Chairman □ Chairman 11125 Gulf Shore Drive 21350 Meadowlark Ln ☐ Vice Chairman □Vice Chairman Address: \_\_\_ Unit 501 Kildeer, IL 60047 Director Director Naples, FL 34108 President □ President ☐ Vice President ☐ Vice President ☐ Secretary Treasurer ■ Secretary ☐Treasurer □Other \_\_\_\_\_ □ Other \_\_\_\_\_ Other \_\_\_\_ Other \_\_\_\_\_ □ 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 \_\_\_\_\_ ☐ Chairman □ Chairman Name: □Vice Chairman Address: \_\_\_\_\_ □Vice Chairman Address: □ Director □ Director ☐ President ☐ President ☐ Vice President \_\_\_\_\_ ☐Vice President ☐ Secretary Treasurer □ Secretary □ Treasurer □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. 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.

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

### File Number

5593-119-4



# To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, 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

GRASSMERE FARM DEVELOPMENT INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON APRIL 20, 1990, 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 11TH day of JUNE A.D. 2024 .

Authentication #: 2416304114 verifiable until 06/11/2025

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

SECRETARY OF STATE