Holina Regulator's Name 315 . Calhou St. Address

Tallahassee, Fl.	32301	425-5686
City/State/Zip		Phone #

Office Use Only

		<u> </u>	
CORPORATION	NAME(S) & DOCUMENT	NUMBER(S), (if known)): 9 %:0
1. United	Nightlife Netwo	Oosk Inc. (Document#)	99 NOV -1
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•	poration Name)	(Document #)	12:
3(Corp	poration Name)	(Document #)	<u> </u>
4.	·	•	ਨ
	poration Name)	(Document #) 50001	0,9,0,95,4,059
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Mail out	Will wait Photoco	ppy	Status
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Profit	Amendment	tkase	n As Soon As as a Corp. Number
NonProfit	Resignation of R.A., Officer/	Director Caroly	n As Soon As
Limited Liability	Change of Registered Agent	this h	as a Corp. Number
Domestication	Dissolution/Withdrawal	! .	
Other	Merger	42	5-5687
			Trako
OTHERFILINGS	REGISTRATION/		RECENT LANGEST
Annual Report	Foreign		
Fictitious Name		\dashv \bigvee	The state of the s
Name Reservation	Limited Partnership	_	₩ ₩ ₩ ₩ ₩ ₩
	Reinstatement	$\dashv \qquad \qquad $	
	Trademark	- 171° 1	
	Other	1 11499	
		Examiner's Initia	ls
		, <u></u>	•

TRANSMITTAL LETTER

To:	Qualification Division of C	Tax Lien Section				99 MON - 11 PM 2:
OV TO E		•	r - 4 -	T		2
SUBJ	ECT:	United Nightlife N		must include suffi	iv)	
D	11	(ramo or corp	otation	must metude sum	(A)	,
Dear S	Sir or Madam:					Ü
"Certi	nclosed "Applic ficate of Exister of business in F	ation by Foreign Corporation ce", and check are submitted lorida.	n for Au d to regi	thorization to Transter the above refer	sact Business in renced foreign co	Florida", orporation to
Please	return all corre	spondence concerning this r	natter to	the following:		
		Melissa Anderson				
		(Na	me of Pe	rson)		
		United Nightlife N	etwork	, Inc.		
		(Fin	m/Comp	any)		
		640 North LaSalle,	Suite	350		
			(Address)	· · · · · · · · · · · · · · · · · · ·	
		Chicago, Illinois	60610			
		(Cit	ty/State/2	Zip)		·
Should	you need to cal	ll someone concerning this r	natter, p	ease call:		
Me	lissa Anders	son at (3	¹²)	660-5232		
	(Name of Per		Area Co	de & Daytime Tele	phone Number)	
STREE	ET ADDRESS:		M	AILING ADDRES	SS:	
Qualification/Tax Lien Section Qualification/Tax Lien Division of Corporations Division of Corporation 409 E. Gaines St. P.O. Box 6327						
Tallahassee, FL 32399 Tallahassee, FL 32314						
Enclose	d is a check for	the following amount:				
⋾\$70.0	00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status		3.75 Filing Fee & rtified Copy	S87.50 Fill Certificat Certified	e of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	NCE WITH SECTION 607.150 FOREIGN CORPORATION T United Nightlife Networ	k, Inc.				7	2 3
words or abb	rporation; must include the word reviations of like import in langu n or partnership if not so contain	"INCORPO! 12ge:23-veil c	RATED", " clearly indi	'COMPANY",	4000000 ·		The by 2.
<u>I1</u> 1ir	ois	-	ā	03642298	3 23		ξ.
(State or cour	o is try under the law of which it is i	ncorporated)			number, if a	pplicable)	····
11-12	-97	5.		Pernetus	· 1		
(1	-97 Date of incorporation)		(Duration:	Year corp. wi	Il cease to exi	ist or "perpetua	1")
UPON	QUALIFICATION						- /
(Date fi	QUALIFICATION rst transacted business in Florida) (SEE SEC	TIONS 601)2 and 817 15	S P E \	
					, mra (11114).	-, x .Q, <i>)</i>	
	orth LaSalle, Suite 350), Chicag	o, Illir	nois 60610			
distr	ibution of merchandise	ent mailing :	lies to	taverns			
(Fur p os	ibution of merchandise e(s) of corporation authorized in	and suppi home state o	lies to	o be carried out		-	
(Fur p os	ibution of merchandise	and suppi home state o	lies to	o be carried out		-	
Name and st Name:	ibution of merchandise e(s) of corporation authorized in reet address of Florida regis	and supp home state o tered agent	lies to or country t t: (P.O. B	o be carried out		-	
Name and st Name:	ibution of merchandise e(s) of corporation authorized in reet address of Florida regis Melanie Kuffell 102 North Rome Ave.	and supp. home state of	lies to or country t	o be carried out	ор Вох <u>NO</u> T	•	
Name and st Name:	ibution of merchandise e(s) of corporation authorized in reet address of Florida regis Melanie Kuffell 102 North Rome Ave.	and supp. home state of	lies to or country t	o be carried out	ор Вох <u>NO</u> T	•	
Name and st Name: Tice Address:	ibution of merchandise e(s) of corporation authorized in reet address of Florida regis Melanie Kuffell 102 North Rome Ave. Tampa,	and supp. home state of	lies to or country t	o be carried out ox or Mail Dr lorida, <u>3360</u> 0	ор Вох <u>NO</u> T	•	
Name and st Name: Fice Address: Registered :	ibution of merchandise e(s) of corporation authorized in reet address of Florida regis Melanie Kuffell 102 North Rome Ave. Tampa,	and supp. home state o	lies to or country t t: (P.O. B	o be carried out ox or Mail Dr lorida, 33600 (Zip o	op Box <u>NOT</u> 5 code)	<u>r</u> acceptable)	
Name and st Name: Name: Registered: ling been name is application in the pi	ibution of merchandise e(s) of corporation authorized in reet address of Florida regis Melanie Kuffell 102 North Rome Ave. Tampa,	and supp. home state of tered agent cept service of the as register to the proper	lies to or country t t: (P.O. B	o be carried out ox or Mail Dr lorida, 33600 (Zip of	op Box NOT	Cacceptable)	

6-442 898-1

of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

	TORS (Street address only - P.O. Box NOT ac	- -					
_	3432 N. Janssen	- ± 		Çi,			
	Chicago, Illinois 60657			99			
Vice Chairn	nan:			2 2			
Address:				2:			
	Kevin Berg			7 7			
_	3432 N. Janssen	 -		·			
_	Chicago, Illinois 60657	_					
Director:	Michael Blatter_	·····					
Address:	1847 W. Ohio #3						
B. OFFIC	Chicago, Illinois 60622 CERS (Street address only - P.O. Box NOT						
President: _	Steven Berg Ranks wang			**************************************			
Address:	1133 N. Dearborn #1604		- , , , , , , , , , , , , , , , , ,				
_	Chicago, Illinois 60610	<u>- ·</u>	_				
Vice Preside	ent: Michael Blatter	=					
Address:	1847 W. Ohio #3						
_	Chicago, Illinois	60622	·				
Secretary: _	Steven Berg	1					
Address:	1133 N. Dearborn #	1604_					
_	Chicago, Illinois	60610					
Treasurer:	Steven Berg						
Address:	1133 N. Dearborn #1604						
_	Chicago, Illinois	60610					
NOTE: If 1	necessary, you may attach an addendum to the a	pplication listin	g additional officers and/or din	ectors.			
14	(Signature of Chairman, Vice Chairman, or	- PR	ESTORY	tion)			



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do

hereby certify that united nightlife network, Inc., a domestic corporation, incorporated under the laws of this state november 12, 1997, appears to have complied with all the provisions of the Business corporation act of this state relating to the filing of annual reports and 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

Desse White

SECRETARY OF STATE