



# M 02000001473

ACCOUNT NO. : 072100000032

REFERENCE : 612068 4324776

AUTHORIZATION :

COST LIMIT : \$ PPD

ORDER DATE : June 6, 2002

ORDER TIME : 9:23 AM

ORDER NO. : 612068-005

CUSTOMER NO: 4324776

CUSTOMER: Mr. Tim Marquardt  
Comark, Inc.  
444 Scott Drive

Bloomington, IL 60108

200005727782--2  
-06/10/02--01024--009  
- \*\*\*\*125.00 \*\*\*\*125.00

FOREIGN FILINGS

NAME: COMARK CAPITAL LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight -- EXT# 1156

EXAMINER: \_\_\_\_\_

FILED  
02 JUN 10 PM 1:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
02 JUN 10 AM 10:27  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

6/10/02

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. COMARK CAPITAL LLC  
(Name of foreign limited liability company)

2. ILLINOIS 3. 36-4485118  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. DECEMBER 7, 2001 5. PERPETUAL  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. MAY 10, 2002  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))


7. 444 SCOTT DRIVE, ATTN: TAX DEPT  
BLOOMINGDALE, IL 60108-3111  
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☐

9. The name and usual business addresses of the managing members or managers are as follows:  
COMARK, INC. 444 SCOTT DRIVE, BLOOMINGDALE, IL 60108  
INSIGHT ENTERPRISES, INC. 1305 W. AUTO DRIVE, TEMPE, AZ 85284

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: LESSOR OF COMPUTER + PERIPHERAL EQUIPMENT

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)  
GARY KOVANDA  
\_\_\_\_\_  
Typed or printed name of signee

FILED  
JUN 10 PM 1:38  
02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

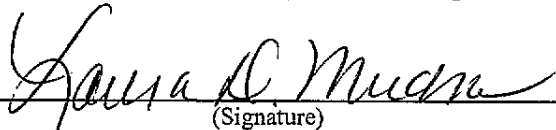
COMARK CAPITAL LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company  
(Name)  
1201 Hays Street  
Florida street address (P.O. Box **NOT** ACCEPTABLE)  
Tallahassee FL 32301  
(City/State/Zip)

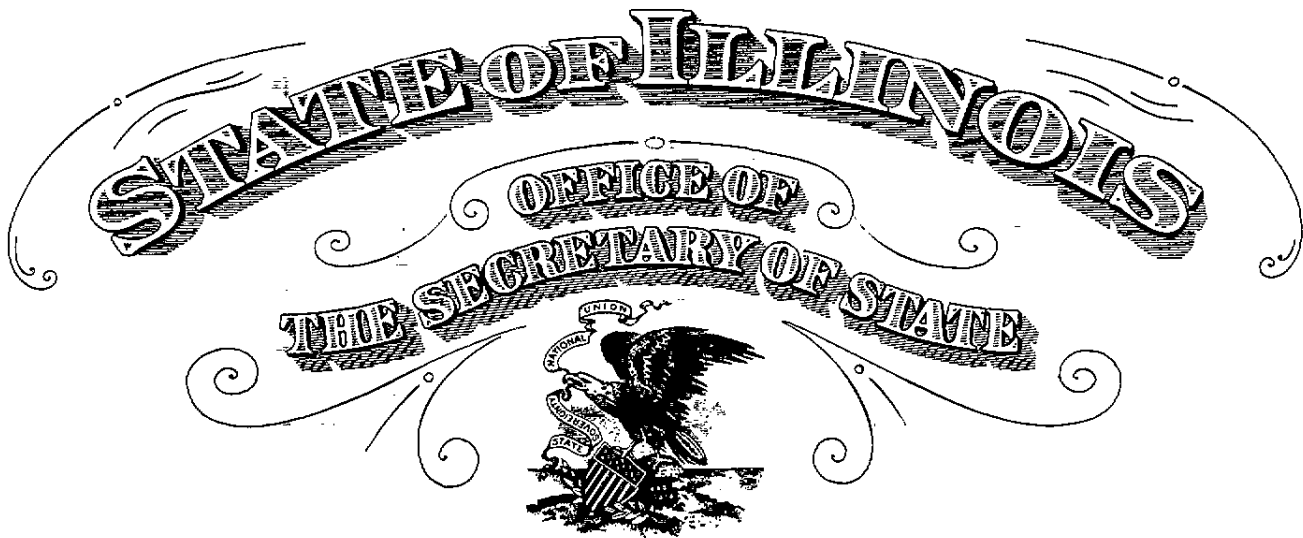
FILED  
02 JUN 10 PM 1:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.*

  
(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

File Number 0063706-8



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

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that*

COMARK CAPITAL, LLC,  
HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 07, 2001,  
APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED  
LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING  
OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT  
BUSINESS 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* 6TH  
*day of* JUNE *A.D.* 2002

*Jesse White*

SECRETARY OF STATE