

M03000002273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

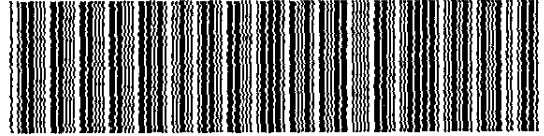
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03 JUL 11 PM 12:41
STATE
TALLAHASSEE, FLORIDA

RECEIVED
03 JUL 11 AM 8:47
DIVISION OF CORPORATION

BK

ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: FCA0000000005

REFERENCE:
(Sub Account) 204 0327-1

DATE: 7/11

REQUESTOR NAME: Lexis Document Services

ADDRESS: _____

TELEPHONE: (____) (____) ext (____)

CONTACT NAME: _____

CORPORATION NAME: Springwood Manager LLC

DOCUMENT NUMBER: _____
(if applicable)

AUTHORIZATION: Cynthia J. Woodlyard

☒ CERTIFIED COPY (1-9)
☒ CERTIFICATE OF STATUS (1-9)
☒ PLAIN STAMPED COPY

<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call if Problem	<input type="checkbox"/> After 4:30
<input type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input type="checkbox"/> Pick Up
<input type="checkbox"/> Hail Out		

03 JUL 11 PM 12:41
 FILED
 SEATTLE
 WASHINGTON
 STATE
 FIDELITY & SECURITY
 ASSURANCE CO. OF
 AMERICA

125.00

**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. Springwood Manager LLC
(Name of foreign limited liability company)
2. Illinois
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 45-0518326
(FEI number, if applicable)
4. June 25, 2003
(Date of Organization)
5. perpetual
(Duration. Year limited liability company will cease to exist or "perpetual")
6. upon qualification
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.153, F.S.))
7. 100 North LaSalle Street, Suite 910
Chicago, Illinois 60602
(Street address of principal office)

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

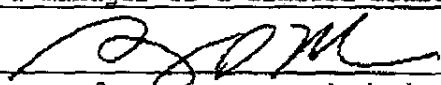
9. The name and usual business addresses of the managing members or managers are as follows:

Gary S. Richman
100 North LaSalle Street, Suite 910
Chicago, Illinois 60602

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: _____

Act as a manager of a limited liability company


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 S. Richman
Typed or printed name of signer

**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:

SPRINGWOOD MANAGER LLC

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

MARC RICHMAN

(Name)

15310 AMBERLY DRIVE, SUITE 207

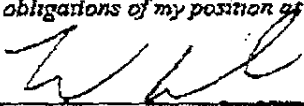
Florida street address (P.O. Box NOT ACCEPTABLE)

TAMPA,

FL 33647

(City/State/Zip)

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)

03 JUL 11 PM 12:41
FILED
TAMPA, FLORIDA
STATE

File Number 0094739-3



To all to whom these Presents Shall Come, Greeting:

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

SPRINGWOOD MANAGER LLC,
HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JUNE 25, 2003,
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* 25TH
day of JUNE *A.D.* 2003



Jesse White

SECRETARY OF STATE