

M03000002587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

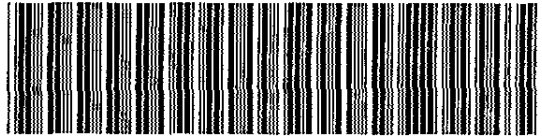
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2003 AUG -5 PM 12:23

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

03 AUG -5 AM 11:16

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

J. BRYAN AUG - 5 2003

**CT CORPORATION**

August 5, 2003

Secretary of State, Florida  
409 East Gaines Street  
Tallahassee FL 32399

Re: Order #: 5906718 SO  
Customer Reference 1: None Given  
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Lynnphil Enterprises, LLC (IL)  
Registration  
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Brigham Weir  
Fulfillment Specialist  
Brigham\_Weir@cch-lis.com

600 East Jefferson Street  
Tallahassee, FL 32301  
Tel 850 222 1092  
Fax 850 222 7615

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2003 AUG -5 PM 12:23  
CT CORPORATION'S  
TALLAHASSEE, FLORIDA

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. Lynnphil Enterprises, LLC  
(Name of foreign limited liability company)
2. Illinois  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 35-2169276  
(FEI number, if applicable)
4. May 22, 2002  
(Date of Organization)
5. 2052  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon Registration  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 434 McDaniels Circle, #305, Clarendon Hills, Illinois 60514  
(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:

Edward D. Norris  
424 McDaniels Circle, #305  
Clarendon Hills, Illinois 60514

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: \_\_\_\_\_

To own, develop and operate real property in all lawful business incident

thereto.

Edward D. Norris  
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.)

Edward D. Norris

Typed or printed name of signee

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2003 AUG -5 PM 12:23  
CLERK OF SUPERIOR COURT  
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:

Lynnphil Enterprises, LLC

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

Edward D. Norris

(Name)

2941 Gardens Blvd.

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


Naples

FL

34105

(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)

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2003 AUG -5 PM 12:23  
HALLANDER, FLORIDA

File Number

0071835-1



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

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

LYNNPHIL ENTERPRISES, LLC,  
HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MAY 22, 2002,  
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*  
day of AUGUST A.D. 2003

*Jesse White*

SECRETARY OF STATE