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JIVISION OF CORFURATION

FOREIGN LIMITED LIABILITY COMPANY

ML Kennedy, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SLIBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: ML Kennedy, LLC (Name of foreign limited liability company) 3. 37-1461743 2 Illinois (Awisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4. December 13, 2002 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpendal") (Date of Organization) 6. Upon Qualification (Date first transacted business in Florida. (See sections 608,501, 608,502, and 817.155, F.S.) 7, 1555 North Sheffield Avenue, Chicago, IL 60622 (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: Michael J. Lerner 1555 North Sheffield Avenue, 10. Attached is an original certificate of existence, no more than 90 days old, duly, authenticated by the official having costudy of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a firmign language, a translation of the certificate under oath of the translator must be subgritted) 11. Nature of business or purposes to be conducted or promoted in Florida: Any lawful business and I Minois Limited Liability which is permitted under Company Acts. Signature of a methor 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 penjury that the facts stated herein are true.)

Typed or printed name of signee

Michael J. Lerner

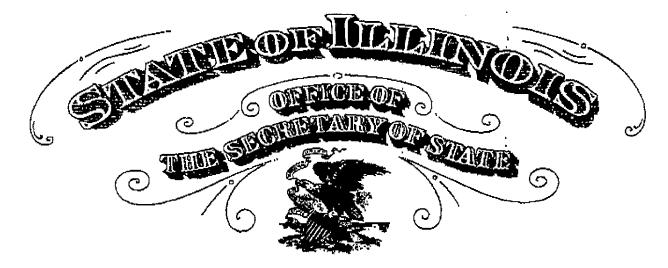
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLOREDA 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 Com	pany is:	•	•	
MI.	Kennedy, LLC	·		_
2. The name and the Florida street address	of the registered	dagent and office	are:	
CT C	orporation Sy	yatem		
	(Name)	i	`	.44 .44
			•	-
	, Pine Islan		<u>, </u>	.I.
Florida street ad	dress (P.O. Box <u>NO</u>	T'acceptable)	:	303
				SE
. Plantation	F L	. 33324		
	(City/State/Zip)	, , , , , , , , , , , , , , , , , , ,		بر سرر.
		1	**	
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Having been named as registered agent and liability company at the place designated in registered agent and agree to act in this cap statutes relating to the proper and complete accept the obligations of my position as reg	this certificate, I pacity. I further a performance of i	hereby accept the agree to comply w my duties, and I a	t appointment as ith the provisions of a m familiar with and	
(Signature)	James M. Ha - Assistant S ecret	* ·· ·	•	
\$ 100.00 \$ 25.00 \$ 30.00 \$ 5.00	Designation Certified Co	r Application of Registered Ag py (optional)		•

File Number

0082476-3



To all to whom these Presents Shall Come, Greeting:

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

hereby certify that
MI KENNEDY, LLC,
HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 13, 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 2003 day of

A.D.

SECRETARY OF STATE