

M05 000000 324

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

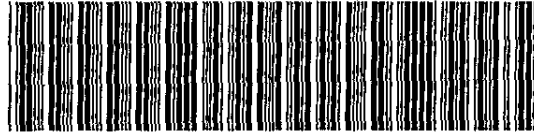
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W04-47033 1110, 647

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1/7/05



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2005 JAN -7 AM 8:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

December 27, 2004

BRIAN S. HICKEY
55 OGDEN AVE.
CLARENDON HILLS, IL 60514

SUBJECT: XCHANGE PROPERTIES
Ref. Number: W04000047033

We have received your document for XCHANGE PROPERTIES and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a foreign limited liability company must end with "L.L.C.," "L.C.," "Limited Liability Company," or "Limited Company." Please amend your application accordingly.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick
Document Specialist

Letter Number: 804A00071473

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Xchange Properties
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Brian S. Hickey
(Name of Person)

Xchange Properties
(Firm/Company)

55 Ogden Ave
(Address)

Clarendon Hills, IL 60524
(City/State and Zip Code)

For further information concerning this matter, please call:

Brian S. Hickey at (630) 654-4100
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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. Exchange Properties, LLC (Exchange Properties) Exchange Properties, LLC
(Name of Foreign Limited Liability Company)

2. ILLINOIS 3. 36-4449405
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 6.7.01 5. 5.25.2040
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. TBD
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 55 Ogden Ave
Clarendon Hills, IL 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:

Brian Hickey 427 N. MADISON Hinsdale, IL 60521
Andrei Vorobiev 639 S. Jackson Hinsdale, IL 60521

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: Residential real estate

B8M
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.)

Brian Stevens Hickey
Typed or printed name of signer

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

PURSUANT TO THE PROVISIONS OF SECTIONS 608.414 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:

Exchange Properties

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

CorpDirect Agents, Inc.

(Name)

103 N. Meridian Street, Lower Level

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

*103 N. Meridian St.
Lower Level*

Tallahassee, Florida 32301

(City/State/Zip)

I, the undersigned, being the duly authorized officer of the above named 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 understand the provisions of the Florida Statutes relating to the duties of a registered agent.

E. G. L.

(Signature)

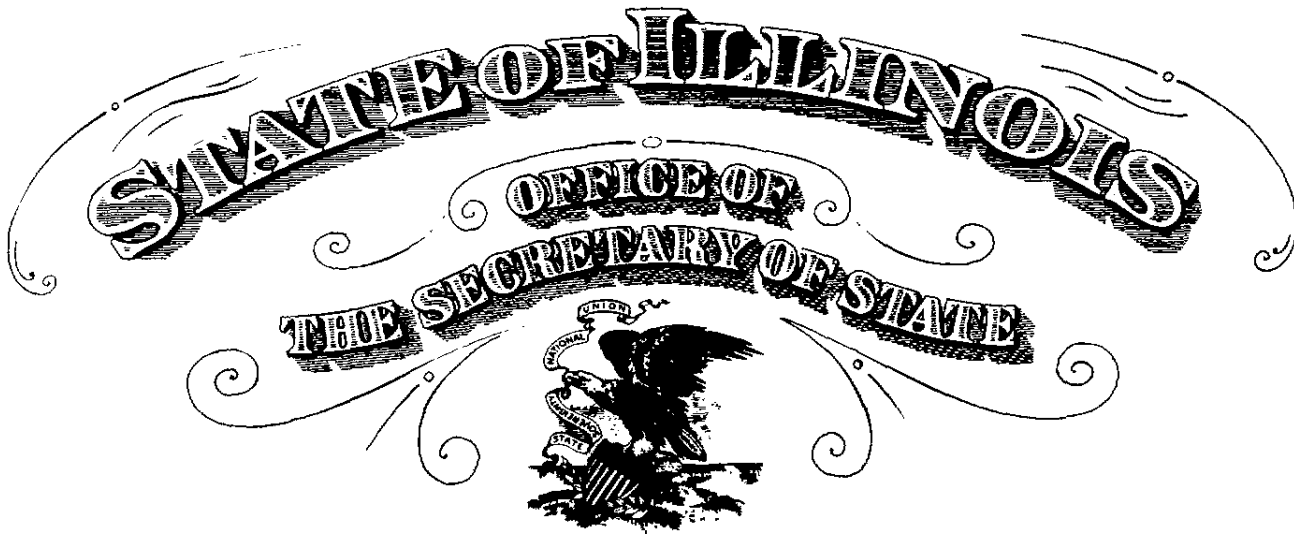
\$100.00
\$ 25.00
\$ 30.00
\$ 5.00

Filing Fee for Application
Designation of Registered Agent
Certified Copy (optional)
Certificate of Status (optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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To all to whom these Presents Shall Come, Greeting:

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

EXCHANGE PROPERTIES, L.L.C.,
HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JUNE 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*
day of JANUARY A.D. 2005

3RD



Jesse White

SECRETARY OF STATE