

Florida Department of State

Division of Corporations Public Access System

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(((H050001753573)))

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Division of Corporations

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No 1/22/0

FOREIGN LIMITED LIABILITY COMPANY

JKMP GROUP, L.L.C.

Certificate of Status	0
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DIVISION OF CORPORATION

Fax Audit Number: H05000175357 3

TRANSMITTAL LETTER	
TO: Registration Section Division of Corporations	
SUBJECT: JKMP Group, L.L.C.	
(Name of Limited Liability Company)	
The enclosed "Application by Foreign Limited Liability Company for Autho Florida," Certificate of Existence, and check are submitted to register the abcliability company to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
liona-Anna Wiss _s E59	
liona-Anna Wiss 5 E 59 (Name of Person)	75.05
Ilons-Anne Wiss, P.A.	ECAR TO
(Firm/Company)	22
1000 Lincoln Road, Suite 208	JUL 21 M 9: 02 LAHASSEE, FLORI
(Address)	9: Dí
Miami Beach, FL 33139	DE P
(City/State and Zip Code)	····
For further information concerning this matter, please call:	
Anna Krimshtein at (305) 856-244	ne Telephone Number)
(Name of Person) (Area Code & Daytin	ne Telephone Number)
STREET ADDRESS: Registration Section Registration Section Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADD Registration Sect Division of Corp P.O. Box 6327 Tallahassee, Florida 72399 Tallahassee, Florida 72399	tion porztions
Enclosed is a check for the following amount:	
	디 \$160.00 Filing Fee, Certificate of Status & Certified Copy

--- Fax Apdit Number: Fi05000175357 3

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

IN COMPLIANCE WITH SECTION 608:503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BY REVIEWS IN THE STATE OF FLORIDA:

1. JKMP Group, L.L.C.

(Name of Foreign Limited Liability Company)

2. Illi	nois 3 35-4369832
co co	risdiction under the law of which foreign limited liability (FEI number, if applicable) inpany is organized)
4. N	fay 3, 2000 Perpetual
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
б	
	(Date first transacted business in Plorida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 2	000 S. Michigan Ave. #307
_	Thicago, Illinois 60616
	(Street Address of Principal Office)
8. I	f limited liability company is a manager-managed company, check here
9. 1	The name and usual business addresses of the managing members or managers are as follows:
]	Ken Lieber, 2000 S. Michigan Ava. #307, Chicago, Illinois 60616
_	John Jones, 3651 N. Wilton, Chicago, Illinois 60613
theju	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in risoliction, under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ation of the certificate under oath of the translator must be submitted.)
11.	Nature of business or purposes to be conducted or promoted in Florida: real estate investment
_	development
	Min- lune 6/10
	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 berein are true.)
	Ilona-Anne Wiss
	Typed or printed name of signee

Fax Audit Number: H050001753573

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.

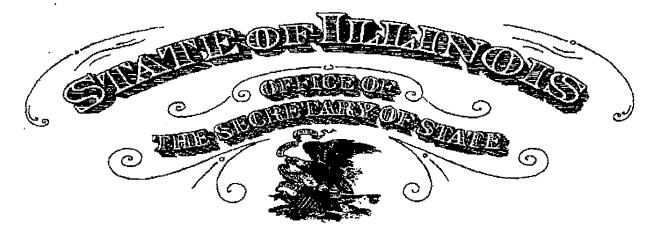
. The name	e and the Florida street addre	ess of the registered agent and office	are: TALL
	liona-Anne Wiss, €59-		A P
		(Name)	21 1A58
	1000 Lincoln Road, Suite	208	二二 西安 至
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	9: 0
	Miami Beach	FI_ 33139	
		City/State/Zip	3 2
ibility com pent and ag lating to th	pany at the place designated t gree to act in this capacity. I f he proper and complete perfor	nd to accept service of process for the in this certificate, I hereby accept the further agree to comply with the provenance of my duties, and I am familiagent as provided for in Chapter 608, I	appoiniment as registered isions of all statutes ir with and accept the

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

Fax Audit Number: H05000175357 3

File Number

0040918-9



To all to whom these Presents Shall Come, Greeting:

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



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 19TH ፓርኒኒ

day of

SECRETARY OF STATE