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SECRETARY OF STATE

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ON SERVICE COMPANY	•
ACCOUNT NO.	: _072100000032
REFERENCE	: 062084 4377580
AUTHORIZATION	Land of a For E
COST LIMIT	: \$ 125.00
ORDER DATE: April 25, 2006	SSEE PHIS
ORDER TIME : 10:19 AM	LORE 2: 5
ORDER NO. : 062084-005	
CUSTOMER NO: 4377580	
FOREIGN 1 NAME: JONATHAN'S BZ	···
XXXX QUALIFICATION (TYPE:]	<u>Lī.</u>)
PLEASE RETURN THE FOLLOWING, AS	S PROOF OF FILING:
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD ST	FANDING
CONTACT PERSON: Troy Todd	EXT# 2940
	EXAMINER:

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 BUSINESS IN THE STATE OF FLORIDA:

1. Jonathan's Ba	y , LLC (Name of Foreign Limited	17:	ALIU.	
2. Missouri (Jurisdiction under the law company is organized)	of which foreign limited liability	3.	20-4751285 (FEI number, if applicable) PR perpetual	7
4. April 20, 2006 (Date of Organization)	zanization)	5.	(Duration: Year limited liability company will cease to	
(Si	Date first transacted business in I se sections 608,501 & 608,502 F. Suite 100, Clayton, Mi	.S. t		10:57
,			f Principal Office)	
8. If limited liability cor	npany is a manager-manage	ed ¢	ompany, check here	
9. The name and usual b	usiness addresses of the ma	maį	ging members or managers are as follows:	
Bell-Summerlin LL	C, Member, 226 S. Mera	me	ec, Suite 100, Clayton, MO 63105	
Brovisor LLC, Me	mber, 30 West 14th Stre	et	, Chicago, IL 60605	
the jurisdiction under the law of translation of the certificate und		opy ibmi	· · ·	k in
	r purposes to be conducted	Or j	promoted in Florida:	
(In an	accordance with section 608,408(3), affirmation under the penalties of pe	, F.S crive	norized representative of a member. I., the execution of this document constitutes y that the facts stated herein are true.) y, By: The Michael Litz Rev. Liv. Trust,	Member

Typed or printed name of signee By: Michael Litz, Trustee

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	of the Limited Liability Company is:	
Jonath	an's Bay, LLC	
2. The name a	and the Florida street address of the registered agent and office are:	
	Corporation Service Company	
	(Name)	
	1201 Hays Street	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Tallahassee FL 32301	
	City/State/Zip	
liability compa agent and agre relating to the obligations of	named as registered agent and to accept service of process for the above stated limited any at the place designated in this certificate, I hereby accept the appointment as regis see to act in this capacity. I further agree to comply with the provisions of all statutes proper and complete performance of my duties, and I am familiar with and accept the my position as registered agent as provided for in Chapter 608, Florida Statutes. I Service Company (Signature)	tered

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

STATE OF MISSOURI



Robin Carnahan Secretary of State

CORPORATION DIVISION CERTIFICATE OF GOOD STANDING

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

JONATHAN'S BAY, LLC LC0733005

was created under the laws of this State on the 20th day of April, 2006, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 25th day of April, 2006

n Amahan

Secretary of State

Certification Number: 8642486-1 Reference: Verify this certificate online at http://www.sos.mo.gov/businessentity/verification