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((Requestor's Name)		
	(Address)		
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	(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL	
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(Business Entity Name)		
(Document Number)		
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: TRICO INVESTMENT GROUP LLC (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:
Please return all correspondence concerning this matter to the following: TOPY ARMSTRONG, ESQ. (Name of Person) Toly ARMSTRONG PA John STRONG PA 3
Jody ARMSTRONG PA SA
18012 THIRD STREET E. (Address)
REDINGTON SHORES FLORIDA 33708 (City/State and Zip Code)
For further information concerning this matter, please call:
JoDy ARMSTRONG at (727) 394-1284 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 (Area Code & Daytime Telephone Number) STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount:



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 8, 2007

JODY ARMSTRONG, ESQ 18012 THIRD STREET E REDINGTON SHORES, FL 33708

SUBJECT: TRICO INVESTMENT GROUP LLC

Ref. Number: W07000006604

We have received your document for TRICO INVESTMENT GROUP LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

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) 245-6097.

Letter Number: 007A00009640

Marsha Thomas Document Specialist ility ach

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: (Name of Foreign Limited Liability Company) (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 12-31-2060 2-15-2005 (Date of Organization) 5. /2-31 - 2000
(Duration: Year limited liability company will cease to exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 1163 E. OGDEN AVE SURE 105-165 TI. 60563 (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 SAME AS NO.7. 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.)

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.)

TEFFREY MODEE

Typed or printed name of signee

07 APR 12 AH 10: 03

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Name and Address:

-Ξ

MGR	Title: "MGR" = Manager "MGRM" = Managing Member
JEFF MOORE 1163 E OGDEN ANE SIE. 705-165 NAPERVILLE, IL 60563	Name and Address:

| | |

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:	
TRICO INNESTMENT GLOUP 22C	
2. The name and the Florida street address of the registered agent and office are:	OT APR 12
JoDy ARMSTRONG (Name)	0250
18012 TH'AD STREET E. Florida Street Address (P.O. Box NOT ACCEPTABLE)	AH 10: 03
REDINGTON SHORES FL 33708 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, Florida Statutes.

Jody Alemativ .
(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

File Number

0142707-5



To all to whom these Presents Shall Come, Greeting:

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

TRICO INVESTMENT GROUP, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON FEBRUARY 15, 2005, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



Authentication #: 0702100220

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 21ST

day of

JANUARY

A.D.

2007

Desse White

Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE