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(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Rycoline Products LLC	
(Name of Lin	mited Liability Company)
	iability Company for Authorization to Transact Business in submitted to register the above referenced foreign limited
Please return all correspondence concerning this	matter to the following:
Jackie Purcell	
4)	Jame of Person)
Rycoline Products	
(F	irm/Company)
5540 Northwest Highw	/ay
	(Address)
Chicago IL 60630	
(City/S	State and Zip Code)
For further information concerning this matter, p	lease call:
Jackie Purcell	at (708) 236-3888
(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate	

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.	Rycoline Products LLC	
	(Name of Foreign Limited Liability Company)	
	Delaware 3. 36-3102238	
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4.	1/1/2005 5. Perpetual	
	(Date of Organization) (Duration: Year limited liability company will cease exist or "perpetual")	se to
6.	merger with Rycoline Products, Inc on 1/1/2005	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7.	5540 Northwest Highway	3S 3S
	Chicago IL 60630	CRE 1
	(Street Address of Principal Office)	### TEN
8.	If limited liability company is a manager-managed company, check here	FIGE
	<i>?</i> :	5.7
9.	The name and usual business addresses of the managing members or managers are as follows:	言
	Gary Anderson 5540 Northwest Hwy, Chicago IL 60630	
	Kevin Yeazell 5540 Northwest Hwy, Chicago IL 60630	
	David Hill 5540 Northwest Hwy, Chicago IL 60630	
thx	O. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language anslation of the certificate under oath of the translator must be submitted.)	
11	1. Nature of business or purposes to be conducted or promoted in Florida:	
	Sale of printing supplies and solutions	•
	720	
	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.)	
	Gary Anderson	
	Typed or printed name of signee	

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.

TO DESIGNATE A R FLORIDA.	EGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF
1. The name of the Li	mited Liability Company is:
Rycoline Produ	ıcts LLC
	Florida street address of the registered agent and office are: Corporation System
	(Name) CT Corporation System, 1200 S. Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE) ntation FL 33324 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.

Robert S. Lane
Assistant Secretary

(Signature)

Whis

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

Delaware

PAGE 1

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RYCOLINE PRODUCTS LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF MAY, A.D. 2007.



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Warriet Smith Windson, Secretary of State

AUTHENTICATION: 5647359

DATE: 05-03-07