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ACCOUNT NO. : 072100000032

REFERENCE :

059871

AUTHORIZATION

ORDER DATE: August 17, 2007

ORDER TIME : 4:25 PM

ORDER NO. : 059871-010

CUSTOMER NO: 7525750

FOREIGN FILINGS

NAME:

AFFINITY PROPERTY SERVICES,

LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY _____ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Debbie Skipper -- EXT# 2948

EXAMINER:

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")			
	,,			
co	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the wonsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C.," "LLC.")			
2.	Illinois 3. Applied for	ردم		
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	3		
4.	August 17, 2007 5. Perpetual	ζ., .		
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	27		
6.	Has not begun transacting business	200		
٠.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)			
7	1555 North Sheffield			
•	Chicago Illinois 60622			
	Chicago, Illinois 60622 (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:			
	Michael Lerner, 1555 North Sheffield, Chicago, Illinois 60622			
	Brian Niven, 1555 North Sheffield, Chicago, Illinois 60622			
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record a jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a uslation of the certificate under oath of the translator must be submitted.)	sin		
11.	. Nature of business or purposes to be conducted or promoted in Florida: Real Estate sales, marketing	ŋ,		
	consulting and other operations related to the business of real estate.			
	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.) Michael Lerner			
	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.

1. The nam	ne of the Limited Liability (Company is:	
Affinity P	roperty Services, LLC		
If name una	ivailable, the alternate name	e to be used in the state of Florida is:	
2. The nam	e and the Florida street add	ress of the registered agent and office are:	
	Corporation Service	e Company	
		(Name)	
	1201 Hays Street		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
	Tallahassee	FL 32301	
		City/State/Zip	
liability comp agent and ag relating to th obligations o	pany at the place designated gree to act in this capacity. I se proper and complete perfo	and to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as registered further agree to comply with the provisions of all statutes formance of my duties, and I am familiar with and accept the agent as provided for in Chapter 608, Florida Statutes. Obb Deborah D. Skipper Asst. V. Pres.	

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

Certificate of Status (optional)

\$ 5.00

File Number

0229929-1



To all to whom these Presents Shall Come, Greeting:

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

AFFINITY PROPERTY SERVICES, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON AUGUST 17, 2007, 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 #: 0723201280

day of **AUGUST**

the State of Illinois, this 20TH

A.D.

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of

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

SECRETARY OF STATE