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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: The Van Buren Group, L2C (Name of Limited Liability Company)	<u> </u>
The enclosed "Application by Foreign Limited Liability Company for Aut Florida," Certificate of Existence, and check are submitted to register the a liability company to transact business in Florida	
Please return all correspondence concerning this matter to the following:	
Jwen Harvey (Name of Person)	
Name of Person)	
The Van Burea Group, Ll	<u></u>
(Firm/Company)	
200 SE 12 Street Suite (Address)	504
Miami, FL 33/3/ (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Name of Person) at (3/2) 2 (Name of Person) (Area Code & Day	82 - 7000 viime Telenhone Number)
MAILING ADDRESS: STREET ADDRESS Division of Corporations Division of Corporati	
P.O. Box 6327 Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Tallahassee, FL 3230	
Enclosed is a check for the following amount: \$\Begin{align*} \pm	

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. The Van Buren Group, L.C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
The Van Buren Group II, LLC (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the	written
consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabili	ity
Company," "L.L.C.," "LLC.")	
2. Ilinois (Jurisdiction under the law of which foreign limited liability) 3. 01-0867648 (FEI number, if applicable)	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)	
company is organized)	
4. May 05, 2006 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
(Duration: Year limited hability company will cease to exist or "perpetual")	
6. Not yet transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
(Date first transacted business in Florida, if prior to registration.)	
(See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 200 SE 125 Street Suite 504	
11	
Miami, FL 33/3/ (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: Wen Harvey 200 5 1 5 5 + ree + Suite 504 Miam; FL 33.	13/
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recthe 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.)	ords in
11. Nature of business or purposes to be conducted or promoted in Florida: $\frac{Real Eg + a + e}{}$	_
brokerage and munagement.	•
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	Langer Contraction
an affirmation under the penalties of perjury that the facts stated herein are true.)	Exercises
Muom Harvey	111
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 name of the Limited Liability Company is:
The Van Buren Group, LLC
If name unavailable, the alternate name to be used in the state of Florida is:
The Van Buren Group II, LLC
2. The name and the Florida street address of the registered agent and office are:
Dwen Harvey (Name)
200 SE / ET Suite 504 Florida Street Address (P.O. Box NOT ACCEPTABLE)
Miumi, FL 33131 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.

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

SCRETARY OF STATE

File Number

0184969-7



To all to whom these Presents Shall Come, Greeting:

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

THE VAN BUREN GROUP, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MAY 05, 2006, 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 #: 0800900776

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

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of

the State of Illinois, this 9TH

day of JANUARY

A.D.

DB JAN 10

Pesse White

SECRETARY OF STATE

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