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D. BRUCE

FEB 2 1 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Lone Oak - Stuart, L.L.C. (Name of Lim	ited Liability Company)		
The enclosed "Application by Foreign Limited Lia Florida," Certificate of Existence, and check are suliability company to transact business in Florida			
Please return all correspondence concerning this m	natter to the following:		
Victor Reyes			
(Na	nme of Person)		
Reyes Holdings, L.L.C.		08 SE SE	
(Fit	rm/Company)	CAH LAH	
9500 W. Bryn Mawr Avenu	ue, Suite 700	21 PM	The same of the sa
	(Address)	H 3:	6
Rosemont, Illinois 60018		3: 30 STATE FLORIDA	
(City/St	tate and Zip Code)		
For further information concerning this matter, ple	ease call:		
Victor Reyes	at (_847) 227-6686		
(Name of Person)	(Area Code & Daytime Telepho	one Number)	
MAILING ADDRESS:	STREET ADDRESS:		
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amount: \$\sum \\$125.00 \text{ Filing Fee} \sum \\$130.00 \text{ Filing Fee & Certificate of the following amount:}		Filing Fee, Certi of Status & Cer	

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:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE ST	ATE OF FLORIDA:
_{1.} Lone Oak - Stuart, L.L.C.	
(Name of Foreign Limited Liability Company; must include	"Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of consent of the managers or managing members adopting the alternate Company," "L.L.C.," "LLC.")	
_{2.} Delaware	26-1987743
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
	Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6	TAS OS
(Date first transacted business in Florid (See sections 608.501 & 608.502 F.S. to	a, if prior to registration.) determine penalty liability)
_{7.} 9500 W. Bryn Mawr Avenue, Suite 700	ASA 2 games
Rosemont, Illinois 60018	SET OF R
(Street Address of I	
8. If limited liability company is a manager-managed co	_ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
9. The name and usual business addresses of the managi	ng members or managers are as follows:
Lone Oak Realty LLC, 9500 W. Bryn Mawr	Avenue, Suite 700, Rosemont, IL 60018
10. Attached is an original certificate of existence, no more than 90 days the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under oath of the translator must be submitted.	not acceptable. If the certificate is in a foreign language, a
	Own and loage property
11. Nature of business or purposes to be conducted or pr	romoted in Florida: Own and lease property.
That the	•
Signature of a member or an author	
(In accordance with section 608.408(3), F.S., an affirmation under the penalties of perjury	the execution of this document constitutes

Typed or printed name of signee

Victor Reyes

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.

	: - Stuart, L.L.C.	 .		
If name unav	ailable, the alternate name to be used in the state of Florida is:			
2. The name and the Florida street address of the registered agent and office are:		SEGRI TALLA	08 FE	_
CT Corporation System			FEB 2	
(Name)		– Bäs F∀∺	_	1
1200 South Pine Island Road		OF STA	PH 3:	
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	STATE LORIDA	3: 30	*****
	Plantation 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.

James M. Halpin
Assistant Secretary

\$ 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

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "LONE OAK-STUART, L.L.C." 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 NINETEENTH DAY OF FEBRUARY, A.D. 2008.

OB FEB 21 PH 3: 30
SECRETARY OF STATE

4506218 8300

080168310

You may verify this certificate online at corp.delaware.gov/authver.shtml

Warriet Smith Windsor, Secretary of State

AUTHENTICATION: 6388465

DATE: 02-19-08