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SECRETARY OF STATE

M. THOMAS
AUG 2 2 2008
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: The Corncrib Group LLC (Name of Limited Liability Company)				
The state of the s	ability Company for Authorization to Transact Business in abmitted to register the above referenced foreign limited			
Please return all correspondence concerning this m	natter to the following:			
JASON A	PARSON STEEL			
(Na	me of Person)			
(Firm/Company)				
(Address)				
Orland Park, 1L 60462— (City/State and Zip Code)				
For further information concerning this matter, please call:				
JAGON A. PARSON (Name of Person)	at (<u>312</u>) <u>673-7812</u> (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: \$\sum \\$125.00 \text{ Filing Fee} \sum \\$130.00 \text{ Filing Fee & Certificate of }\$	□\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate Status Certified Copy of Status & Certified Copy			

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

	COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN ATTED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1	The Corner b Group, LC (Name of Foreign Limited Liability Company)	
2. ₇	Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)	
4.	(Date of Organization) 5. Per Petual (Duration: Year limited liability company will cease to exist or "perpetual")	
6.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	مد. م
7.	8672 Butterfield Lane	'2 q
	Orland Park, 11 60462 (Street Address of Principal Office)	
8.	If limited liability company is a manager-managed company, check here	س
9.	The name and usual business addresses of the managing members or managers are as follows:	
	Jason A. Parson, Valerie A. Parson 8672 Butterfield In.,	
	Orland Park, 11 60462	
	David Carl Talky, Kathy Ann Talky 14218 Sugar Creek Rd, Ft Wayne, IN 4681	ı.
10. the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under oath of the translator must be submitted.)	4
11.	. Nature of business or purposes to be conducted or promoted in Florida: Any and all lawful	
-	business for which UC may be organized.	
	Juan a Jana	
	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.)	
	JASON A. PARSON Typed or printed name of signee	
	Typed or printed name of signee	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 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 Claotity Company is:	·
The Corncrib Group LC	<i>o</i>
2. The name and the Florida street address of the registered agent and office are:	THE 2
In Corp Services, Inc.	HO
17888 67th Court North Florida Street Address (P.O. Box NOT ACCEPTABLE)	ORDER CO
Loxahatchee FL 33470 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.

Janice rull on behalf of Incorp

(Signature) Services, Inc.

\$ 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

0256165-4



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 CORNCRIB GROUP LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JULY 08, 2008, 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.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 13TH day of AUGUST A.D. 2008

Desse White