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EXAMINER

COVER LETTER

то:	Registration Section Division of Corporations
SUBJE	CCT: MICHAEL R MARGET LLC Name of Limited Liability Company
The end Existen	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate o
Please	return all correspondence concerning this matter to the following:
	MICHAEL R MARGET TO THE STATE OF THE STATE O
	return all correspondence concerning this matter to the following: MICHAEL R MARGET LLC Firm/Company
	321 N. CLARIC ST, SUITE 500 Address
	CHICAGO, IL 60654 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For furt	her information concerning this matter, please call:
	Michael Marget at (813) 484-0832 Name of Person Area Code & Daytime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclos	\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & Certificate of Status Certified Copy

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: MICHAEL R. MARGET LLC
(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 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 Liability Company," "L.L.C," "LLC.") not applicable disregarded en ILLINO13 (Jurisdiction under the law of which foreign limited liability SEPT. 23 Zoo9 (Date of Ofganization) (Duration: Year limited liability company will cease to (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 60654 (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: 321 N. CLARK STREET, SUITE SOO CHICAGO IL 60654 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the 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.) 11. Nature of business or purposes to be conducted or promoted in Florida: Hransachon of any and all I Amful business that Limited Linbilly Companies may conduct under Florida Statutes, including consulting services. 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 R Manget
Typed or printed name of signce

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 Compa	iny is:	
MICHAEL R.	MARGE	et lle
f unavailable, the alternate to be used in the	state of Flor	ida is:
2. The name and the Florida street address o	f the register	red agent and office are:
	na	1.01 E T
JEANUE	(Name)	the l
	(rame)	
10/ 5.12	244 57	REET, UNIT 604
Florida Street Addre	ess (P.O. Box	NOT ACCEPTABLE)
14MPA	FL FL	33602
	City/State/2	Lip

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.

(Signature)

\$ 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

0316954-5



To all to whom these Presents Shall Come, Greeting:

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

MICHAEL R. MARGET LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON SEPTEMBER 23, 2009, 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 #: 0926601976

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 23TH

day of SEPTEMBER

A.D.

2009

SECRETARY OF STATE