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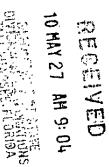
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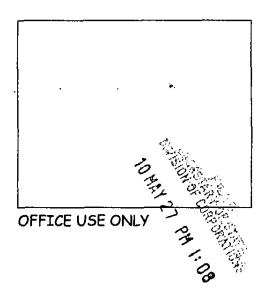


B. KOHR MAY 2 7 2010

**EXAMINER** 

TO MAY 27 PM 1: 08

FLORIDA RESEARCH & FILING SERVICES, INC. 1211 CIRCLE DRIVE
TALLAHASSEE, FL 32301
PHONE (850)656-6446



WALK-IN

**ENTITY NAME:** 

INSITE KISSIMMEE, L.L.C.

CK# 4643 FOR \$160.00

PLEASE FILE THE ATTACHED QUALIFICATION & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

\_\_\_ STAMPED COPY

XXX CERTIFICATE OF STATUS

Examiner's Initials

#### **COVER LETTER**

	ision of Corporations	رجم ا
SUBJECT:	InSite Kissimmee, L.L.C.	(P)
BODGEC1.	Name of Limited Liability Company	
Existence, an	"Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," id check are submitted to register the above referenced foreign limited liability company to transact busing	
Please return	all correspondence concerning this matter to the following:	
	Ginny Lunsford	
	Name of Person	
	InSite Real Estate, L.L.C.	
	Firm/Company	
	1400 16th Street, Suite 300	
	Address	
	Oak Brook, Illinois 60523	
	City/State and Zip Code	
	glunsford@insiterealestate.com  E-mail address: (to be used for future annual report notification)	
F 64		•
For lumner in	formation concerning this matter, please call:	
	Ginny Lunsford at ( 630 ) 617-9129	
	Name of Person Area Code & Daytime Telephone Number	
	LING ADDRESS: STREET ADDRESS: sion of Corporations Division of Corporations	
Regi	stration Section Registration Section	
	Box 6327 Clifton Building  hassee, FL 32314 2661 Executive Center Circle	
1 ana	Tallahassee, FL 32301	
Enclosed is	a check for the following amount:	
<b>\$</b> 1	25.00 Filing Fee \$\int \text{\$130.00 Filing Fee & }\text{\$\subset\$\$\$\$\$\$\$\$\$ \$\subset\$\$\$\$\$\$\$\$ \$Certificate of Status \$\text{\$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: InSite Kissimmee, 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 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.") 90-0581413 (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) May 21 2010 Perpetual (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608,501 & 608.502 F.S. to determine penalty liability) 7 1400 16th Street, Suite 300 Oak Brook, Illinois 60523 (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: Gerald J. Kostelny, 1400 16th Street, Suite 300, Oak Brook, Illinois 60523 Larissa A. Addison, 1400 16th Street, Suite 300, Oak Brook, Illinois 60523 Christopher G. Hutter, 1400 16th Street, Suite 300, Oak Brook, Illinois 60523 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.) Acquire, own, 11. Nature of business or purposes to be conducted or promoted in Florida: develop, operate, maintain and sell 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.) Larissa A. Addison

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:
InSite Kissimmee, L.L.C.
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
NRAI Services, Inc.
(Name)
2731 Executive Park Drive, Suite 4
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Weston FL 33331 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.  NRAI SERVICES, Inc.  (Signature)

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

\$ 30.00 Certified Copy (optional)

5.00 Certificate of Status (optional)



#### To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

INSITE KISSIMMEE, L.L.C., HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MAY 21, 2010, 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.



the Stat day of

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 24TH

lay of MAY

A.D.

2010

Authentication #: 1014401669 Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE