## M110000000362

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special instructions to Filing Officer					
·					

Office Use Only



100191983151

01/26/11--01010--021 \*\*160.00

SUFFICIENCY OF FILING

DEFARTMENT OF STATE

B. KOHR
JAN 2 6 2011
EXAMINER



CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173

FILING COVER SHEET

ACCT. #FCA-14 **CONTACT: KATIE WONSCH** DATE: 01/26/2011 **REF. #:** 000928.140793 CORP. NAME: T JOHNSON REAL ESTATE LLC ( ) ARTICLES OF INCORPORATION ( ) ARTICLES OF AMENDMENT ( ) ARTICLES OF DISSOLUTION ( ) ANNUAL REPORT ( ) TRADEMARK/SERVICE MARK ( ) FICTITIOUS NAME ( XX ) FOREIGN QUALIFICATION ( ) LIMITED PARTNERSHIP ( ) LIMITED LIABILITY ( ) REINSTATEMENT ( ) MERGER ( ) WITHDRAWAL ( ) CERTIFICATE OF CANCELLATION ( ) OTHER: STATE FEES PREPAID WITH CHECK# 538272 FOR \$ 160.00 **AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:** COST LIMIT: \$\_\_\_\_ PLEASE RETURN:

( XX ) CERTIFICATE OF GOOD STANDING

( ) PLAIN STAMPED COPY

Examiner's Initials

( XX ) CERTIFIED COPY

( ) CERTIFICATE OF STATUS

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	T Johnson Real Estate LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
0	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written usent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")
,	IIIInois 3, 27-4602243
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
١.	January 18, 2011 5. Perpetual
	(Date of Organization) (Duration: Year limited liability company will cease in exist or "perpetual")
5.	(Date first transacted business in Florida, if prior to registration.)
	(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	1601 Lively Blvd.
	Elk Grove, Illinois 60007
	(Street Address of Principal Office)
3.	If limited liability company is a manager-managed company, check here
€.	The name and usual business addresses of the managing members or managers are as follows:
	Frances Johnson, 1601 Lively Blvd., Elk Grove, Illinols 60007
	•
• •	A thirt and in a marific and the Control of the Control of the submedition of the Afficial Lawrence and the Control of the Con
h	). Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in e jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a anslation of the certificate under cath of the translator must be submitted.)
1	1. Nature of business or purposes to be conducted or promoted in Florida: Owning Real Estate
	Barry Leen
	Signature of 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, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$ 817,155, F.S.).

Barry P. Siegal, Authorized Representative for Terry and Frances Johnson
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.

The name of the Limited Liability Company is:  T Johnson Real Estate LLC				
If name unav	railable, the alternate nan	ne to be used in the state of Florida is:	· -	
2. The name	and the Florida street ad	ddress 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.

Leta Singleton, 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)

File Number

0348720-2



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

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

T JOHNSON REAL ESTATE LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JANUARY 18, 2011, 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 #: 1102501804

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

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 25TH

day of

JANUARY

A.D.

2011

SECRETARY OF STATE