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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

T. CLINE

APR 19 2011

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	CT: _37SIGNALS, LLC Nam	e of Limited Liability Company			
The end Existen	closed "Application by Foreign Limited Liabi ce, and check are submitted to register the abo	lity Company for Authorization to Transact Business in Flove referenced foreign limited liability company to transact	lorida," C et busines	ertificato s in Flor	e of rida
Please	eturn all correspondence concerning this mat	ter to the following:			
	ANN ROSENBLUM	Name of Person			
	WARADY AND DAVIS	LLP			
	· · · · · · · · · · · · · · · · · · ·	Firm/Company			
	1717 DEERFIELD RO	OAD SUITE 300 SOUTH Address			
	DEERFIELD, IL 60	015-3977 City/State and Zip Code			
	AROSENBLUM@WARADY E-mail address: (to	DAVIS COM be used for future annual report notification)		~ 3	
For fur	her information concerning this matter, pleas	e call:	SECRE ALLAH	2011 APR 18	n
	ANN ROSENBLUM Name of Person	at (<u>847</u>) <u>267-9600</u> Area Code & Daytime Telephone Number	TARY O		
	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	F STATE FLORIDA	FM 1: 0.1	Ö
Enclo	sed is a check for the following amour \$125.00 Filing Fee Certificate of State	e & \$\Bigcap\$155.00 Filing Fee & \$\Bigcap\$160.00 Filing Fee, C			

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:

137SIGNALS,_ 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.")
2. TILITNOTS (Jurisdiction under the law of which foreign limited liability company is organized) 3. 36-4364126 (FEI number, if applicable)
4. 05/01/2000 (Date of Organization) 5. Deficition: 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)
7. 30 NORTH RACINE SUITE #200 Pu 2
CHICAGO, II. 60607 (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:
JASON FRIED 30 NORTH RACINE SUITE #200 CHICAGO, IL 60607
DAVID HANSSON 30 NORTH RACINE SUITE #200 CHICAGO, IL 60607
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 eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: <u>COMPUTER SOFTWARE</u>
DEVELOPER
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. 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 s.817.155, F.S.)
JASON FRIED
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:						
	TAYLOR WEIBL	(Name)		_		
	1107 W. HORA Florida Str	TIO STREET eet Address (P.O. Box NOT	[ACCEPTABLE)			
	TAMPA	FL City/State/Zip	33606	-		
liability company	at the place designate	nt and to accept service of ed in this certificate, I he		tment as register		

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.

Tay (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

0040950-2



To all to whom these Presents Shall Come, Greeting:

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

37SIGNALS, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MAY 01, 2000, 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 #: 1107601086

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 17TH

day of

MARCH

A.D.

2011

lesse White

SECRETARY OF STATE