Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000028363 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

Foreign Limited Liability Company MAT CAPITAL LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

B. KOHR

B. KOHR

FEREtedranic Filing Menu

Corporate Filing Menu

Help

EXAMINER

EXAMINER

https://efile.sunbiz.org/scripts/efilcovr.exe

8656336892

2/2/2012 vo:21 2102/20/20

CT CORPORATION

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: MAT CAPITAL LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida,

Please return all correspondence concerning this matter to the following:

GREG PURSE		
	Name of Person	
MAT CAPITAL LLC		
	Firm/Company	
6700 WILDLIFE WAY		
	Address	
LONG GROVE, ILLINOIS	5 60047	
	City/State and Zip Cods	
greg.purse@mathold.c	om	
For further information concerning this matter, please	be used for luture annual reposition	on houseston)
,	•	
GREG PURSE		383-8410
Name of Person	Area Code & Daytime Te	lephono Number
	STREET ADDRESS: Division of Corporations	
Registration Section	Registration Section	
•	Clifton Building	
	2661 Excoutive Center Circle Tallahassee, FL 32301	•
Enclosed is a check for the following amount		
\$125.00 Filing Fee \$\int \text{\$130.00 Filing Fee} \text{\$Cartifloate of Status}	& ୮၂ \$155.00 Flling Fee &	of Stetue & Certified Coov

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

IN COMPLIANCE WITH SECTION 608.503. FLORIDA STATUTE	S, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE	
1. MAT CAPITAL LLC (Name of Foreign Limited Liability Company; must include	i de la companya di managana di Agrica di
(Name of Foreign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the altern Company," "L.L.C," "LLC.")	e of transacting business in Florida and attach a copy of the written name. The alternate name must include "Limited Liability
2. ILLINOIS 3.	27-4034449
(Jurisdiction under the law of which foreign limited liability company is organized)	(I'Bl number, if applicable)
	PERPETUAL
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
;)•	·
(Date first transported business in Flor (See sections 608,501 & 608,502 P.S. t	ida, if prior to registration.). o determing penalty liability)
6700 WILDLIFE WAY	
LONG GROVE , ILLINOIS 60047	
(Street Address of	Principal Office)
. If limited liability company is a manager-managed c	ompany, check here 🗹
. The name and usual business addresses of the manag	ring members or managers are as follows:
STEVE WANG, 6700 WILDLIFE WAY, LONG	3 GROVE, IL 60047
	•
O. Attached is an original certificate of existence, no more than 90 day be jurisdiction under the law of which it is organized. (A photocopy is anslation of the certificate under cath of the translator must be automit	s not acceptable. If the certificate is in a foreign language, a
1. Nature of business or purposes to be conducted or p	romoted in Florida:
YACHT RESELLER	
Dus	
Signature of a member or an auth	orized representative of a member.
(in accordance with section 608,408(3), F.S., the execution	
penalties of perjury that the facts stated herein are true.	I am aware that any false information submitted in a third degree felony as provided for in s.817.155, F.S.)
GREG PURSE	man well at taking se brackers for High property Land
Consider a sinted a	ome of signon

Z609829398 \$0:ZI Z10Z/Z0/Z0

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.

I. The name of the Limited Liability Company is: MAT CAPITAL LLC		
If unavailable,	the alternate to be used in the state of Florida is:	
2. The name at	nd the Florida street address of the registered agent and office are:	
	C.T. CORPORATION SYSTEMS (Name)	
	1200 SOUTH PINE ISLAND ROAD Florida Street Address (P.O. Box NOT ACCEPTABLE)	
·	PLANTATION PL 33324 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.

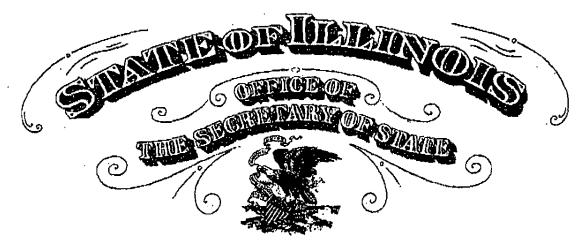
Laura Broderick Assistant Secretary

\$ 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

0293436-1



To all to whom these Presents Shall Come, Greeting:

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

MAT CAPITAL LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON FEBRUARY 11, 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.



Authentication #: 1203201178

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

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 1ST

day of

FEBRUARY

A.D.

2012

SECRETARY OF STATE