# M12000005757

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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SECRETARY OF STATE

DEPARTHENT OF STATE

J. SAULSBERRY EXAMINER

OCT 16 2012



ACCOUNT NO. : 12000000195	
REFERENCE : 377176 4368595	
AUTHORIZATION :	
COST LIMIT : \$ 130.00	
ORDER DATE: October 10, 2012	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
ORDER TIME : 3:06 PM	
ORDER NO. : 377176-130	
CUSTOMER NO: 4368595	2812 E
FOREIGN FILINGS	GREATHY OF STANASSEE FL
NAME: UB II (SITEL) LESSEE, LLC	e 24 ORIDA
XXXX QUALIFICATION (TYPE: LL)	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
XX PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Kimberly Moret EXT# 52949	

EXAMINER:

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

IN COMPLIANCE WITH SECTION (08:503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

UB II (Sitel) Lessee, LLC	M) IN THE STATE OF PLOKIDS:			
(Name of Foreign Limited Liability Company;	must include "Limited Liability Company;" "L.L.C.,	" or "LLC.")	<del></del>	
(If name unavailable, enter alternate name adopted for consent of the managers or managing members adopted Company," "L.L.C." "LLC.")				
2. Delaware	3. (FEI number, if applicab			
(Jurisdiction under the law of which foreign limited company is organized)	Пабилу (Евлиност, и аррисао	10)		
4. 10/11/2012	5. Perpetual			
(Date of Organization)	(Duration: Year limited liability comp exist or "perpetual")	any will cease	e to	
6. Upon Filing				
(Date first transacted busi (See sections 608.501 & 60	iness in Florida, if prior to registration.) 08.502 F.S. to determine penalty liability)			
7: 2340 River Road, Suite 310		ALL:	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
		<b>3</b> 20	<u> </u>	•
Des Plaines, IL 60018 (Stree	et Address of Principal Office)	SS	<u>.</u>	1
8. If limited liability company is a manager-i	was up and a company about hora			į
8. 11 minted naprinty company is a manager-	managed combany, check here	0 E	ිස   ස	Į
9. The name and usual business addresses of	the managing members or managers are as	follo de la	M5 86 24	
UB Holding Company II, LLC		<b>P</b>		
C/O Brennan Investment Group, LLC, 23	340 River Road, Stitle 310			
Des Plaines, IL 60018			<del></del>	
10. Attached is an original certificate of existence, no mothe jurisdiction under the law of which it is organized. (A translation of the certificate under cath of the translator m	A photocopy is not acceptable. If the certificate is in a fo			ls in
11. Nature of business or purposes to be cond	ducted or promoted in Florida: To own, leas	e, and	<del>.</del>	
operate real properties			*	
Robert 4	- Vanecto	_		
<del>-</del> • •	or an authorized representative of a membe			
	S., the execution of this document constitutes an affirmation of the control of t			
document to the Department of State	constitutes a third degree felony as provided for in suthorized Representative		)	
ROUGH G. VALIECKO A	amoresea vebresemanae			

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.

If unavaila	ble, the alternate to be used	l in the state of Florida is:	,
2. The name	ne and the Florida street ad	dress of the registered agent and office are	:
	Corporation Service 6		· · · · · · · · · · · · · · · · · · ·
		(Name)	SEC SEC
	1201 Hays Street		SECRETARY
	Florida Str	ret Address (P.O. Box: NOT ACCEPTABLE)	SSE SSE 15
	Tallahassee	FL 32301 City/State/Zip	F.S.T. S.
		Спутманегар	8 24 GATE GATE
liability con agent and a relating to t	npany at the place designati igree to act in this capacity, the proper and complete per		ointment as registered as of all staintes th and accept the

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

## Delaware

DXCF 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "UB II (SITEL) LESSEE, LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE FIFTEENTH DAY OF OCTOBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "UB II (SITEL)

LESSEE, LLC" WAS FORMED ON THE ELEVENTH DAY OF OCTOBER, A.D.

2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

SECRE ISBY OF STATE

5226289 8300

121128120

Jeffrey W Bullock, Secretary of St AUTHENTY CATION: 9915397

DATE: 10-15-12

You may verify this certificate online at corp.delaware.gov/authver.shtml