M1200000 5951

(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



800240662298



SEGRETARY OF STALE
DIVISION OF COSPORATIONS



ACCOUNT NO. : 12000000195
REFERENCE : 389695 4304417
AUTHORIZATION: Spelle man
COST LIMIT : \$(12500
ORDER DATE : October 22, 2012
ORDER TIME : 6:20 PM
ORDER NO. : 389695-005
CUSTOMER NO: 4304417
*->
FOREIGN FILINGS
NAME: SP MANAGER LLC
XXXX QUALIFICATION (TYPE: <u>LL</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Susie Knight EXT# 52956
EXAMINER:

COVER LETTER

j

The enclosed "Application by Foreign Limited Liability Company for Authorization to Trunsact Business in Florida," Certifi Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in I Please return-all correspondence concerning this matter to the following: MARILYN ROTHSCHILD: Name of Person Firm/Company	ificate of Florida
MARILYN ROTHSCHILD: Name of Person	
Name of Person	
Firm/Company	
600 CENTRAL AVENUE, SUITE 365	
Address	
HIGHLAND PARK, ILLINOIS 60035-3257	
City/State and Zip Code:	
Mrothschild@NCIS600.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
MARILYN ROTHSCHILD at (847) 432-3666	•
Name of Person Area Code & Daytime Telephone Number	
MAILING ADDRESS: Division of Corporations Registration Section STREET ADDRESS: Division of Corporations Registration Section	
P.O. Box 6327 Clifton Building Tallahussee, FL 32314 2661 Executive Center Circle Tallahussee, FL 32301	

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

IN COMPLIANCE WITH SECTION (USSO), FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIBITATY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

MANAGER LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
ne unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the it of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabit my," "E.L.C." [LAWARE] [Ediction under the law of which foreign limited liabitity] [Law of which foreign limited liabitity]	
pany is organized) CTOBER 1, 2012 5. PERPETUAL (Date of Organization) (Direction: Year limited liability company will cease to 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) OO CENTRAL AVENUE, SUITE 365	
GHLAND PARK, ILLINOIS 60035-3257 (Sweet Address of Principal Office) imited liability company is a manager-managed company, check here	12 OCT 23
e name and usual business addresses of the managing members or managers are as follows: EMBER: SUSAN WAGNER	M 9: 25
OO CENTRAL AVENUE, SUITE 365 GHLAND PARK, ILLINOIS 60035-3257	
ached is an original conficate of existence, no more than 90 days old, duly authenticated by the official Inving custody of reco diction under the law of which it is organized. (A photocopy is not acceptable. If the conflicate is in a foreign language, a on-of the certificate under conhof the translator must be submitted.)	nisk
nture of business or purposes to be conducted or promoted in Florida:	
Signature of a member or an authorized representative of a member. (In accordance with section 608,408(3), E.S., the recution of this document constitutes an affirmation under the populaties of perjury that the facts stated beroin 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.)	

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:	
SP MANAGER LLC	
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:	
JEFFREY S. FELNER	
(Name)	
6235 FLORIDIAN CIRCLE Florida Street Address (P.O. Box NOT ACCEPTABLE)	
LAKE WORTH FL 33463 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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "SP MANAGER 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 TWENTY-SECOND DAY OF OCTOBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SP MANAGER LLC" WAS FORMED ON THE FIRST DAY OF OCTOBER, A.D. 2012.

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

5220719 8300

121153506

Jeffrey W Bullock, Secretary of State

AUTHENT CATION: 9934442

DATE: 10-22-12

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