Florida Department of State

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Foreign Limited Liability Company

EW PINE AND PLAZA, L.L.C., AN ILLINOIS LIMITED LIAB

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

Electronic Filing Menu

Corporate Filing Menu

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JUN - 3 2013

J. BRYAN 5/31/2013

CR2B027 (9/10)			
oleder (Sire)		COVER LETTER	
	ration Section on of Corporations		
SUBJECT: N	IEW PINB AND PLAZA, L.L.C., A	N ILLINOIS LIMITED LIABILITY COMPANY	
50000011	No	ame of Limited Liability Company	
The enclosed ". Existence, and	Application by Foreign Limited Lial check are submitted to register the s	hility Company for Authorization to Transact Business in Flori bove referenced foreign limited liability company to transact b	da," Certificate of usiness in Florida
Please return at	l correspondence concerning this m	utter to the following:	
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	B-mail address:	kestahl cowen . com (to be used for future annual report notification)	_
For further info	rmation concerning this matter, pice	sse call:	
*********	Name of Person	Area Code & Daytime Telephone Number	-
Divisio Regiso	ING ADDRESS: on of Corporations ration Section ox 6327	STREET ADDRESS: Division of Corporations Registration Section Clifton Building	
	ox 6327 assec, PL 32314	2661 Executive Center Circle Tollahassee, FL 32301	

🖾 \$155.00 Filing Fee & 💢 \$160.00 Filing Fee, Certificate

of Status & Certified Copy

Cenified Copy

Enclosed is a check for the following amount:

Certificate of Status

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HART ITY COMPANY TO TRANSACT BY STATES IN THE STATE OF STOREY.

IMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE NEW PINB AND PLAZA, L.L.C., AN ILLINOIS LIMITED	
(Name of Foreign Limited Liability Company; must includ	
foams unavailable, enter alternate name adopted for the purpose nature of the managers or managing members adopting the alternompany," "L.L.C," "LLC.")	of transacting business in Florida and attach a copy of the writtename. The alternate name must include "Limited Liability
Illinois	د.
Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable) Perpetual (Duration: Year limited liability company will coate for "perpetual")
05/16/2013	Perpetual
(Date of Organization)	(Duration: Year limited liability company will coate to exist or "perpetual")
(Date first transacted business in Flor	ide (Carior to registration)
(See sections 608.501 & 608.502 F.S.	to determine penalty liability)
2034 N. Clark Street	
Chicago, IL 60614	اليا التاريخ
(Street Address o	f Principal Office)
If limited liability company is a manager-managed of The name and usual business addresses of the manager	–
Joseph V. Farago, 2034 N. Clark Street, Chicago, IL 60514	
Attached is an original certificate of existence, no more than 90 d	ays old, duly mathenticated by the official having custody of record
juristiction under the law of which it is organized. (A photocopy slation of the certificate under cath of the translator must be subm	is not acceptable. If the certificate is in a foreign language, a
Nature of business or purposes to be conducted or p	promoted in Florida: ownership and management
of real estate	
Jayya	
Signature of a member or an auth	orized representative of a member.
(In accordance with action 504 4963), FR. the execution penalties of perfury thin-the facts stated herein are true.	on of this document constitutes an affirmation under the 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 2.817.155, F.S.)
Joseph V. Parago, Manager	

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 NEW PINE AND PL		y Company is: LINOIS LIMITED LIABILITY COMPANY	
If unavailable, the	alternate to be us	ed in the state of Plorida is:	
2. The name and t	the Florida street	address of the registered agent and office	are:
		C T Corporation System	32 6
		(Netno)	
		1200 South Pine Island Road	
_	Florida S	Street Address (P.O. Box NOT ACCEPTABLE)	
P	lantation	FI, 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.

By: (Signature)

CT Comporation System James M. Halpin
Assistant Secretary
(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

0437221-2



To all to whom these Presents Shall Come, Greeting:

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

NEW PINE AND PLAZA, L.L.C., AN ILLINOIS LIMITED LIABILITY COMPANY, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MAY 16, 2013, 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 #: 1315101582

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

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 31ST

day of

MAY

A.D.

2013

esse White

SECRETARY OF STATE