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PICK-UP	☐ WAIT	MAIL.
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Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	
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2013 AUG -6 PH 4: 12
SECRETARY OF STATE

Office Use Only

B. BOSTICK
AUG - 7 2013
EXAMINER

CR2E027 (9/10)

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Wade Enterprises, 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:

Enclosed is a check for the following amount:

□ \$130.00 Filing Fee &

Certificate of Status

□ \$125.00 Filing Fee

Ginger Gorde	n .		
	Name of Person		
Wade Enterpr	ises		
	Firm/Company		
444 N Michiga	an Ave, Suite 3540		
	Address		
Chicago, IL 6	0611		
Officago, IL o	······································		- 3
	City/State and Zip Code		??! •
ginger@gdgro	up-inc.com	AH)	2 -
E-mail addres	s: (to be used for future annual report notification)	O. 2.	ı
ther information concerning this matter, p	Janea anth	SEE SY C	
mer information concerning this matter, p	nease can:		D K
Ginger Gorden	_{at} 312 371-4788	FE STATE	
Name of Person	Area Code & Daytime Telephone Number	2	ى ر
MAILING ADDRESS:	STORET ADDRESS.		
Division of Corporations	STREET ADDRESS: Division of Corporations		
Registration Section	Registration Section		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		

□ \$155.00 Filing Fee &

Certified Copy

■ \$160.00 Filing Fee, Certificate

of Status & Certified Copy

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:

1. Wade Enterprises, LLC (Name of Foreign Limited Liability Company; must include	
(If name unavailable, enter alternate name adopted for the purpose	of transacting business in Florida and attach a conv of the written
consent of the managers or managing members adopting the altern Company," "L.L.C," "LLC.")	ate name. The alternate name must include "Limited Liability
_{2.} Alaska _{3.}	20-3503190
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
	perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. no business yet transacted	ZOI
(Date first transacted business in Flor (See sections 608.501 & 608.502 F.S.	ida, if prior to registration.) to determine penalty liability)
7. 19821 NW 2nd QUENUE	1. #413 SSS + ==
Miami Gardens FL (Street Address of	33/69
(Street Address of	f Principal Office)
8. If limited liability company is a manager-managed of	
9. The name and usual business addresses of the mana	ging members or managers are as follows:
	-
Duyane T. Wade 1982 Miani	Gardens FL 33169
10. Attached is an original certificate of existence, no more than 90 of the jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the translator must be substituted in the certificate under oath of the certificate under oath oath oath oath oath oath oath oath	y is not acceptable. If the certificate is in a foreign language, a nitted.)
11. Nature of business or purposes to be conducted or	promoted in Florida:
marketing services	·
Signed	horized representative of a member.
4	ition of this document constitutes an affirmation under the
penalties of perjury that the facts stated herein are true	e. I am aware that any false information submitted in a
	a third degree felony as provided for in s.817.155, F.S.)
Singer L. Gorde Typed or printed	name of signee
- 	

in

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:		
Wade Enterprises, LLC		
If unavailable, the alternate to be used in the state of Florida is:		,
Wade Enterprises Floriday LLC		<u>_</u>
2. The name and the Florida street address of the registered agent and office are:		
2. The name and the Florida street address of the registered agent and office are: GWGW GOYOU C/O Wade Enterpression (Name) 19821 NW 2nd QUE #413 Florida Street Address (R.O. Boy NOT ACCEPTABLE)	SEC SEC	3
19821 NW 2nd QUE, #413 Florida Street Address (P.O. BOX NOT ACCEPTABLE)		
Miani Gardens FL 33169 City/State/Zip	LORII	PR 1.

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)

State of Alaska

Department of Commerce, Community and Economic Development Corporations, Business and Professional Licensing

Certificate of Compliance

The undersigned, as Commissioner of Commerce, Community and Economic Development of the State of Alaska, and custodian of corporation records for said state, hereby issues a Certificate of Compliance for:

Wade Enterprises, LLC

This entity was formed on September 19, 2005 and is in good standing. This entity has filed all biennial reports and fees due at this time.

No information is available in this office on the financial condition, business activity or practices of this corporation.



IN TESTIMONY WHEREOF, I execute the certificate and affix the Great Seal of the State of Alaska effective July 15, 2013.

Susan K. Bell Commissioner

WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE STATE OF FLORIDA

We, the undersigned, do hereby certify that we are the Managers and/or Managing
Members of Wade Enterprises, LLC, (Name of Limited Liability Company)
a limited liability company duly organized and existing under the laws of (State or Country of Organization)
Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida: Wall Enterprise Florida, LLC (Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability Company, L.L.C., or LLC.) Date: 1 29/13 Signature(s) of Manager(s) and/or Managing Member(s): ACCOUNTY OF PARTIES OF PARTIE



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 22, 2013

GINGER GORDEN 444 N. MICHIGAN AVENUE SUITE 3540 CHICAGO, IL 60611

SUBJECT: WADE ENTERPRISES, LLC

Ref. Number: W13000041035

2013 AUG -6 PM 4: 13
SECRETARY OF STATE
TALL AHASSEE, FLORIDA

We have received your document for WADE ENTERPRISES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC".

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call

(850) 245-6051.

Barbara Bostick Regulatory Specialist II

Letter Number: 813A00017689

2013 AUG -6 PM 4: 13

www.sunbiz.org