## M14000001832

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ACCOUNT NO	). :	1200000	00195			
REFERENC	CE :	057093	7175508	3		
AUTHORIZATIO	on:	Greek	Kenan	,		
COST LIM	IT :	\$ 125.0	0			
ORDER DATE : March 18, 2014	<u>l</u>					
ORDER TIME : 3:08 PM						
ORDER NO. : 057093-030						
CUSTOMER NO: 7175508						
						-
FOREIGN	I FILI	NGS				
NAME: LAMPLIGHTER	R HOME	S, LLC		MEAN		
XXXX QUALIFICATION (TYPE:	<u>LL</u> )				5	•
PLEASE RETURN THE FOLLOWING	AS PR	OOF OF F	ILING:			•.
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD	STAND	PING				
CONTACT PERSON: Susie Knigh	ıt	EXT# 529	56			
		EXAMINER	:			

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: LAMPLIGHTER HOMES, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") Delaware (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 8833 Gross Point Road, Suite 310 Skokie, Illinois 60077 (Street Address of Principal Office) 8833 Gross Point Road, Suite 310 Skokie, Illinois 60077 (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Manager: Lamplighter Manager, LLC, 8833 Gross Point Road, Suite 310, Skokie, Illinois 60077 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an authorized person
(In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein 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.) Mark C. Vaughan Typed or printed name of signee

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:	
LAMPLIGHTER	HOMES, LLC		
If unavailable, t	he alternate to be used	in the state of Florida is:	
2. The name an		dress of the registered agent and office are:	
Corporation Service Company		三至4 声	
		(Name)	
	1201 Hays Street		3
Florida Street Address (P.O. Box NOT ACCEPTABLE)		- The S	
	Tallahassee	32301 FL	
		City/State/Zip	— 34 — Day — 3

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 605, Florida Statutes.

Corporation Service Company

By: Sue G. Knight

Assistant Vice President

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

#### **COVER LETTER**

SUBJECT: _	Name of Limited Liability Company
	Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
Please return al	l correspondence concerning this matter to the following:
	Name of Person
	CORPORATION SERVICE COMPANY
	Firm/Company
	1201 HAYS STREET
	Address
	TALLAHASSEE, FLORIDA 32301
	City/State and Zip Code
	Ipagents@lplegal.com
	E-mail address: (to be used for future annual report notification)
	rmation concerning this matter, please call:
BE	Name of Contact Person at (312 Area Code Daytime Telephone Number
	Name of Contact Person Area Code Daytime Telephone Number
Divisio Regist P.O. B	ING ADDRESS:  on of Corporations  ration Section  ox 6327  assee, FL 32314  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301
	check for the following amount:  5.00 Filing Fee

# Delaware

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### The First State

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

DELAWARE, DO HEREBY CERTIFY "LAMPLIGHTER HOMES, 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 EIGHTEENTH DAY OF MARCH, A.D. 2014

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LAMPLIGHTER HOMES, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF MARCH, A.D. 2014.

5499912 8300

140345736

Jeffrey W Bullock, Secretary of State

AUTHENT\( CATION: 1216254 \)

DATE: 03-18-14

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