# Florida Department of State

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Division of Corporations

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: (850)222-1092

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RESTI	Address:			

## Foreign Limited Liability Company AUTOMATCH USA, LLC

Certificate of Status Certified Copy 05 Page Count \$160.00 Estimated Charge

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### COVER LETTER

Division of Corpora				
SUBJECT: AutoMatch USA	, LLC			
	Name of Limit	ed Liability Company		_
The enclosed "Application by Existence, and oheck are subm	Poreign Limited Liability Com itted to register the above refer	pany for Authorization unced foreign limited i	to Transact Business in Plorids liability company to transact bus	siness in Florid
Please return all corresponden	concerning this matter to the	following:		2014 K
Brunt Moody	, Executive Vice President			AH,
	N	ame of Person		1857 <b>2</b> 5
AutoMatch I	ISA, LLC			
<del> </del>	P	ism/Company		OF STATE
250 Parkway	Drive, Suite 270			_ \$\forall \cdot \
		Address		
Lincolnshire	IL 60069			_
	City/S	tate and Zip Code		-
kbell@campi	igworld.com			
	E-muil address; (to be use	I for future annual report	notification)	-
For further information concer-	ning this matter, please call;			
Jennifor Napier		at (847 ) 2	29-6465	
Nau	s of Contact Person	Area Code	Daytims Telephone Number	_
MAILING ADDRES Division of Corporati Registration Section P.O. Box 6327 Tallahassen, FL 3231	ons Divisio Registra Clifton 2661 B	CT ADDRESS: n of Corporations ation Section Building recentive Center Circle asce, FL 32301		
Enclosed is a check for th	e following amount:			
□ \$125.00 Filing Peo		Certified Copy	of Status & Certified	

# 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:

	• • •	_	
f name unavailable, enter alternate name adopted for the purpose of transacting business in Fi iability Company," "L.L.C," or "L.L.C.")	orida. The alternate name mu	st ioclude "Li	mited
Minneseta 3, 45-5064753			_
(Jurisdiction under the law of which foreign limited liability company is organized)	FEI number, if applicable)	J- (-)	2014
N/A		<u>&gt;</u>	HAR.
(Data first transacted business in Florida, if prior to regis (See sections 605.0904 & 605.0905, F.S. to determine pena	tration.) Ity liability)	ESS.	- <del>1</del> 22 25
250 Parkway Drive, Suite 270	<del>- , </del>		_ ·
Lincolnshire, IL 60069		E.S.	2
(Street Address of Principal Office)		<u> </u>	<b>-₩</b>
250 Parkway Drive, Suite 270		≓rd	00
(Mailing Address)  The name, title or capacity and address of the person(s) who has/ha	ve authority to manage	is/are:	-
(Mailing Address)  7. The name, title or capacity and address of the person(s) who has/ha	, –		_
(Mailing Address)  7. The name, title or capacity and address of the person(s) who has/ha	, –		<del>-</del>
(Mailing Address)  7. The name, title or capacity and address of the person(s) who has/ha	, –		<b>-</b> - 
(Mailing Address)  7. The name, title or capacity and address of the person(s) who has/ha	, –		<b>-</b> - 
(Mailing Address)  7. The name, title or capacity and address of the person(s) who has/hastent Moody, Executive Vice President 250 Parkway Drive, Suite 270,  Attached is an original certificate of existence, no more than 90 days	Lincolnshire, IL 60	d by the of	- - - Ticial
	old, duly authenticates	d by the of	
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(Malling Address)  7. The name, title or capacity and address of the person(s) who has/hasent Moody, Executive Vice President 250 Parkway Drive, Suite 270,  Attached is an original certificate of existence, no more than 90 days aving custody of records in the jurisdiction under the law of which it is ecceptable. If the certificate is in a foreign language, a translation of the nust be submitted)  But Moody.	old, duly authenticates organized. (A photoc certificate under oath	d by the of opy is not of the tran	slato:

# 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 th	c Limited Liability Con	npany is:			
AutoMatch USA, LL	C				
If unavailable, the	alternate to be used in t	he state of Florida is:			
2. The name and the Florida street address of the registered agent and office are:			ALLAHAS.	2014 HAR	
c	T Corporation System		(A.2) (M.2) (M.4)	25	
_	(Namo)			<b>⊒</b> €	[7
12	200 South Pine Island Road	·	STATE	<b>₩</b>	
_	Florida Street Address (P.O. Box NOT ACCEPTABLE)			ŎO	
Pl	antation	PL 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 605, Florida Statutes.

By: CT Corporation System James M. Halpin
(Signature) Assistant Secretary

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

### Office of the Minnesota Secretary of State Certificate of Good Standing

I, Mark Ritchie, Secretary of State of Minnesota, do certify that: The business entity listed below was filed pursuant to the Minnesota Chapter listed below with the Office of the Secretary of State on the date listed below and that this business entity is registered to do business and is in good standing at the time this certificate is issued.

Name:

AutoMatch USA, LLC

Date Filed:

03/06/2014

File Number:

743241300024

Minnesota Statutes, Chapter:

322B

Home Jurisdiction:

Minnesota

This certificate has been issued on:

03/24/2014



Mark Ritchie
Mark Ritchie

Secretary of State State of Minnesota