

Division of Corporations

M14000002426

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

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Account Number : FCA000000023
Phone : (850) 222-1092
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Foreign Limited Liability Company
Steven Ventures, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Steven Ventures, 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:

Bruce E. Bell

Name of Person

SFNR

Firm/Company

222 S. Riverside Plaza, Suite 2100

Address

Chicago, IL 60606

City/State and Zip Code

bruce.bell@sfnr.com

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Bruce E. Bell

Name of Contact Person

at (312) 648-2300

Area Code

Daytime Telephone Number

MAILING ADDRESS:
Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Steven Ventures, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

Steven Ventures Apartments, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. This alternate name must include "Limited
Liability Company," "LLC," or "LLC.")

2. Illinois

(Jurisdiction under the law of which foreign limited liability
company is organized)

3. 46-1843512

(FEI number, if applicable)

4.

(Date first transacted business in Florida, (prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3550 Ari Lane

Glenview, IL 60026

(Street Address of Principal Office)

6.

P.O. Box 2367

Northbrook, IL 60062

(Mailing Address)

7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

The Aaron Israel Declaration of Trust is the sole member of the LLC.

Aaron Israel and Diane S. Israel are the Trustees

Their address is 3550 Ari Lane, Glenview, IL 60026

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.817.135, F.S.)

Diane S. Israel

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**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:

Steven Ventures, LLC

If unavailable, the alternate to be used in the state of Florida is:

Steven Ventures Apartments, LLC

2. The name and the Florida street address of the registered agent and office are:

C T Corporation System

(Name)

1200 South Pine Island Road

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Plantation

FL 33324

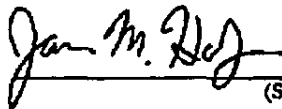
City/State/Zip

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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.



(Signature)

James M. Halpin
Assistant Secretary

\$ 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 0408642-2



To all to whom these Presents Shall Come, Greeting:

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

STEVEN VENTURES, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON NOVEMBER 13, 2012, 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.

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SECRETARY OF STATE
JESSE WHITE
TALLAHASSEE, FLORIDA

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Authenticate at: <http://www.cyberdriveillinois.com>

In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 9TH day of APRIL A.D. 2014 .

Jesse White

SECRETARY OF STATE