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(Re	equestor's Name)	
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SECRETARY OF STATE

MAY 2 9 2014

T. BROWN

COVER LETTER

TO:	Registration Section Division of Corporations	S &
SUBJE	CCT: ENERGY DESIGN (ONSULTANTS Name of Limited Liability Company	
The enc Existen	closed "Application by Foreign Limited Liability Company for Authorization to Transactice, and check are submitted to register the above referenced foreign limited liability con	et Business in Florida," Certificate of npany to transact business in Florida
Please r	return all correspondence concerning this matter to the following:	
	COLLEEN GRANETO	
	Name of Person	
	ENERGY DESIGN CONSULT	ANTS
	Firm/Company	
	2107 W SCHIUER ST L	INIT #3
	Address	
	CHICA60, IL 60622	
	City/State and Zip Code	
	COLLEENRGRANETO Egmail	
	E-mail address: (to be used for future annual report notification	1)
For furt	ther information concerning this matter, please call:	
	COUTEN GRANETO at (216) 906 Name of Contact Person Area Code Daytim	-3308
	Name of Contact Person Area Code Daytim	e 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	
Enclos	sed is a check for the following amount: \$\Boxed{\text{\$130.00 Filing Fee & \$\Boxed{\text{\$155.00 Filing Fee & } \$\Boxed{\text{\$Certificate of Status}}}\$	\$160.00 Filing Fee, Certificate of Status & Certified Copy



May 8, 2014

COLLEEN GRANETO ENERGY DESIGN CONSULTANTS, LLC 2107 W SCHILLER ST UNIT 3 CHICAGO, IL 60622

SUBJECT: ENERGY DESIGN CONSULTANTS, LLC

Ref. Number: W14000029170

We have received your document for ENERGY DESIGN CONSULTANTS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Teresa Brown
Regulatory Specialist II

Letter Number: 914A00009858

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUF	3MITTEI	D TO .	REGISTI	ER A
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLOR 1 FNER 64 DESIGN CONSULTANTS, UL	IDA:			
(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 Liability Company," "L.L.C." or "LLC.")	name mu:	st includ	de "Limite	æd
2. OHTO (Jurisdiction under the law of which foreign limited liability company is organized) 3. 46-2489141 (FEI number, if appliance)	icable)			
4. NIA -				
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	àEC ÆLL	*		
s. <u>2107 W SCHILLER ST .UNIT #3</u>	AH (1)	HA	TI	
CHI(A60, IL 60622	SSEB	28		
(Street Address of Principal Office) 6. 2107 W SCHILLER ST UNIT #3	FLORII	P.H 3: D	Ö	
CHICAGO, IL GOG22 (Mailing Address)	A Driv	07		
7. The name, title or capacity and address of the person(s) who has/have authority to	manage	is/are	: :	
COLLEGN GRANETO, OWNER/CEO		<u>.</u>		
2107 W SCHILLER ST UNIT #3				
CHIGGO, IL 60022		·		
8. Attached is an original certificate of existence, no more than 90 days old, duly auther having custody of records in the jurisdiction under the law of which it is organized. (A acceptable. If the certificate is in a foreign language, a translation of the certificate und 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 perjuant aware that any false information submitted in a document to the Department of State constitutes a third degree felony as proving the section of the certificate and the section of the certificate and the certificate are constituted as a firmation under the penalties of perjuant was a section of the certificate and the certificate are constituted as a firmation under the penalties of perjuant was a constituted as a constitute as	photoc ler oath	of the	s not e transla	ator
<u>Colleen Graneto</u>				
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 REGISTERE) AGENT IN THE STATE OF FLORIDA.

		•			
DESIGN	CONSU	CTANTS	11	<u> </u>	
the Florida str	eet address (of the registe	red age	nt and office are:	
JOHN	REIN	HARDT			
853 5	W EN	TERPR	rse.	WAY	
_					
at the place de and agree to ac o the proper an	signated in the tin this capa and complete priton as regis. (Signa \$ 100.00	his certificate city. I furthe terformance tered by the ture) Filing Fee	e, I here r agree of my di us provid	by accept the appointn to comply with the pro ties, and I am familian ded for in Chapter 605	nent a <mark>s</mark> ovisions of all rwith and
	DESTEN The alternate to be alternate to be alternate to be at the place decay of the proper and other proper and the proper a	DESIGN CONSUME alternate to be used in the street address of the Florida street address of TOHN REIN STUART STUART The day registered agent and the place designated in the street and complete prions of my position as registered agent as registered agent and complete prions of my position as registered agent and complete prions of my posi	TOHN REINHARDT (Name) STUART FL City/State/ at the place designated in this certificate and agree to act in this capacity. I further the proper and complete performance of the proper and complete performance	DESIGN CONSULTANTS, LL the alternate to be used in the state of Florida is: If the Florida street address of the registered age TOHN REINHARDT (Name) 853 SW ENTERPRISE Florida Street Address (P.O. Box NOT AC STUART FL City/State/Zip The place designated in this certificate, I here and agree to act in this capacity. I further agree to the proper and complete performance of my distinct of my position as registered again as provided in the proper and complete performance of my distinct of my position as registered again as provided in the proper and complete performance of my distinct of my position as registered again as provided in the proper and complete performance of my distinct of my position as registered again as provided in the proper and complete performance of my distinct of my position as registered again as provided in the proper and complete performance of my distinct of my position as registered again. (Signature)	e alternate to be used in the state of Florida is: If the Florida street address of the registered agent and office are: JOHN REINHARDT (Name) 853 SW ENTERPRISE WAY Florida Street Address (P.O. Box NOT ACCEPTABLE) STUART FL 34997 City/State/Zip sed as registered agent and to accept service of process for the above stat the place designated in this certificate, I hereby accept the appointing and agree to act in this capacity. I further agree to comply with the proper and complete performance of my duties, and I am familiantions of my position as registered agent as provided for in Chapter 605 (Signature) \$ 100.00 Filing Fee for Application

UNITED STATES OF AMERICA STATE OF OHIO OFFICE OF THE SECRETARY OF STATE

I, Jon Husted, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign business entities; that said records show ENERGY DESIGN CONSULTANTS, LLC, an Ohio For Profit Limited Liability Company, Registration Number 2042587, was organized within the State of Ohio on August 19, 2011, is currently in FULL FORCE AND EFFECT upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 29th day of April, A.D. 2014.

Ohio Secretary of State

an Husted

Validation Number: 201411900895