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SECRETARY OF SECULO

COVER LETTER.

TO:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
SUBJECT: Connect International, 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:
Kenneth Rubin
Name of Person
Connect International, LLC
Firm/Company
2400 E. Devon, Suite #257
Address
Des Plaines, IL 60018
City/State and Zip Code
ken.rubin@bccfs.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Ken Rubin312399-8178
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: STREET ADDRESS: Division of Corporations Division of Corporations
Registration Section Registration Section

Clifton Building

□ \$130.00 Filing Fee & Certificate of Status

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

(Name of Foreign Limited Liability Company, must inc CI Call Center, LLC (If name unavailable, enter alternate name adopted for the purpose of Liability Company," "L.L.C," or "LLC.")	transacting business in Florida. The alternate name must include	le "Limited
2 Delaware	3. 20-5986194	
(Jurisdiction under the law of which foreign limited liability company is organized)		
4. Upon accepted filing		
(Date first transacted business (See sections 605.0904 & 605.090	n Florida, if prior to registration.) 5. F.S. to determine penalty liability)	
_{5.} 2400 E. Devon #257		<u></u>
Des Plaines, IL 60018	>> \(\) \\ \> \\\\\\\\\\\\\\\\\\\\\\\\\\	
•	ess of Principal Office)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
6. 2400 E. Devon #257	<u> </u>	
Des Plaines, IL 60018		<u> </u>
(Ma	ling Address)	<u> </u>
7. The name, title or capacity and address of the pe	rson(s) who has/have authority to manage is/are	:
Kenneth Rubin, Manager, 2400 E.	Devon #257, Des Plaines, IL 600)18
, , , , , , , , , , , , , , , , , , , ,		
		. <u></u>
		a efficial
8. Attached is an original certificate of existence, no having custody of records in the jurisdiction under the acceptable. If the certificate is in a foreign language must be submitted)	he law of which it is organized. (A photocopy is	not

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 1 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.)

Kenneth Rubin, Manager

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:

Connect International, LLC

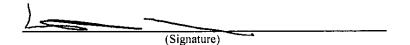
If unavailable, the alternate to be used in the state of Florida is:

Cl Call Center, LLC

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

CT Corporation	on System	 3÷Ω
	(Name)	
1200 South Pine Island Road		
Florida Street Address (P.O. Box NOT ACCEPTABLE)		23 T
Plantation	_{FL} 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.



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



PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "CONNECT INTERNATIONAL, 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 FIFTH DAY OF AUGUST, A.D. 2014.

4236912 8300

141034549

AUTHENTICATION: 1595779

DATE: 08-05-14

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