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DATE:

10/3/14

NAME:

ALFUND III LLC

TYPE OF FILING: APPLICATION

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PA

COVER LETTER

SUBJECT:		AI FUND III LLC				
30b36C1:	Nan	ne of Limited Liability Company				
The enclosed "Applic Existence, and check	eation by Foreign Limited Lial are submitted to register the a	bility Company for Authorization bove referenced foreign limited it	to Transact Business in Flori ability company to transact b	da," Certi usiness li	ificate d n Florid	งใ a
Please return all corre	espondence concerning this me	atter to the following:				
		Tim Byrd				
_		Name of Person		_		
_		Firm/Company		_		
	120	0 North Kirk Ro	ad			
		Addres#				
	Bat	avia, Illinois 605	10			
		City/State and Zip Code		_		
	Ti	im.Byrd@aldi.us	.			
 -		: (to be used for future annual report i				
For further information	on concerning this matter, plea	se call:		ZΩ	14	
	Tim Byrd	at (630)	761-2777		30	
	Name of Contact Person	Area Code	Daytime Telephone Number		1 I	,
MAILING		STREET ADDRESS:			ري	· ·
	Corporations	Division of Corporations				,
Registration		Registration Section				
P.O. Box 63:	-	Clifton Building 2661 Executive Center Circle		差 差	$\tilde{\Sigma}$	
Tallahassee,	FL 32314	Tallahassee, FL 32301		Sin	23	
Englosed is a char	k for the following amou	int•				

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

FOREIGN I	TOT'Y COMPANY TO T	<i>RINSICT BUSINES</i> S AI FUND III LLC		
1	Name of Foreign Limited Liability Compan	y; must include "Limited	IJability Compony,""[_L.C.," or "[J.C."]	
(If name anava Liability Comp	allable, enter elternate name adopted for the pany," "L.L.C." or "L.L.C.")	purpose of transacting bu	siness in Flacida. The alternate name must incl	hule "I.lmited
2. (Jurisdiction company is	DELAWARE under the law of which loreign limited light organized)	3	37-1761616 (Fill number, Kapplicable)	
4	(Date first transacted (See sections 605,0904)	N/A business in Plorida, If pr & 605.0905, P.S. to defer	or to registration.) ning penalty liability)	
5		ROAD, BATA		
	·	reet Address of Principal	•	是 第
6	1200 N. KIRK	ROAD, BATA	VIA, IL 60510	8 7
		(Mailing Address)		一
	•	• • •	has/have authority to manage is/ar K ROAD, BATAVIA, IL 6051	o 🚉 👨
				23
naving custo	ody of records in the jurisdiction u If the certificate is in a foreign lan	ander the law of wi	10 days old, duly authenticated by to sich it is orgunized. (A photocopy is n of the certificate under oath of the	s not
	-		1	
n acconlance wil It dware that ony	to section 605.020). P.S., the execution of this do	luro of an authoriza cuntm considers en affin Department ef State consid	d porson alon under the penalties of perjury that the facts su ries a third degree fellony as provided for in 8 817 1:	aled herein are time 55, F S
		Tim Byrd		
	Typed o	r printed name of s	ignee	

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:	
AI FUND III LLC	
If unavailable, the alternate to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	SECULTI SECULTI
National Corporate Research, Ltd., Inc.	
155 Office Plaza Drive Florida Street Address (P.O. Box NOT ACCEPTABLE)	4 12: 23 4 12: 23 4 10: 24
Tallahassee _{FL} 32301	·
Clty/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.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AI FUND III 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 TWENTY-FOURTH DAY OF SEPTEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AI FUND III LLC" WAS FORMED ON THE TENTH DAY OF DECEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BERN PAID TO DATE.

5446341 8300

DATE: 09-24-14