M14000007871

(Red	questor's Name)	
(Add	dress)	
(Add	iress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	; cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



100264870811

SALLI JO Z ONBIOL JANS BUDDING WAS COLD CLOSE ON STANDARD DEPARTMENT OF STATE

2014 OCT 29 PH 4: 01

PHYISIBILDI GGATGTATIOI

OCT 30 2014
J. HARRIS



NW ZEKAIGE GUMBANA				
ACCOUNT NO. : 12000000195				
REFERENCE : 356572 7175508				
AUTHORIZATION: Spelle Ren				
COST LIMIT : \$ 125.00				
ORDER DATE: October 29, 2014				
ORDER TIME : 3:49 PM				
ORDER NO. : 356572-005				
CUSTOMER NO: 7175508				
FOREIGN FILINGS				
NAME: REEL BIG POPSIE HOLDINGS, LLC				
WWW OUNTED COMPON (MADE 11)				
XXXX QUALIFICATION (TYPE: <u>LL</u>)				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Emily Gray EXT# 62925				
EXAMINER:				

COVER LETTER

TO: Registration Section Division of Corporations		
REEL BIG POF	PSIE HOLDINGS, L	LC
	Name of Limited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed "Application by Foreign Limited Existence, and check are submitted to register to	Liability Company for Authorization to I the above referenced foreign limited liabilities.	ransact Business in Florida," Certificate o ity company to transact business in Florida
Please return all correspondence concerning thi	is matter to the following:	
ROBERT A. F	ROMANOFF	
	Name of Person	······································
LEVENFELD	PEARLSTEIN, LLO	
	Firm/Company	
2 N. LASALLI	E STREET, SUITE	1300 _z 🤻
	Address	000
CHICAGO, IL	. 60602	1300 129 SH 10: L
	City/State and Zip Code	1 100 2
LPAGENTS@	LPLEGAL.COM	
E-mail add	ress: (to be used for future annual report noti	fication)
For further information concerning this matter, j	please call:	ÇO :
BECKY JO MOR	GAN _{at} 312 47	6-7594
Name of Contact Person		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 Tallahassec, FL 32301	
Enclosed is a check for the following ar \$125.00 Filing Fee \$\Bigcup \$130.00 Filing Certificat		☐ \$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:

If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must inc	clude "Lim	_ nit e d
DELAWARE 3. APPLIED FOR		
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)		-
company is organized) UPON QUALIFICATION		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		-
360 W. ILLINOIS STREET, SUITE 11C		
· · · · · · · · · · · · · · · · · · ·	-11	
CHICAGO, IL 60654 (Street Address of Principal Office)	- 용 -	କୁଷ୍ଟ - ଜୁନ୍ଧ
360 W. ILLINOIS STREET, SUITE 11C	T 29	
CHICAGO, IL 60654	7	
(Mailing Address)	<u></u>	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/s		= 1::
GREATBANC, INC., MANAGER		17.
360 W. ILLINOIS STREET, SUITE 11C		,
CHICAGO, IL 60654		,
3. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by aving custody of records in the jurisdiction under the law of which it is organized. (A photocopy acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the submitted)	is not	

EMILY C. HOYT, AUTHORIZED PERSON

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	of the Limited Liability	Company is:	
REEL BIG PO	PSIE HOLDINGS, LLC		
If unavailable,	, the alternate to be used	in the state of Florida is:	
2. The name a	and the Florida street add	dress of the registered agent and office are:	16 N
	Corporation Service Co	ompany	SELFE VISION I
		(Name)	29 ga
	1201 Hays Street		
Florida Street Address (P.O. Box NOT ACCEPTABLE)		6.4 :0	
	Tallahassee	FL 32301	,
		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.

Corporation Service Company By: Emile Kran	Emily Gray Asst. Vice President
(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

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "REEL BIG POPSIE HOLDINGS, 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-NINTH DAY OF OCTOBER, A.D.
2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "REEL BIG POPSIE HOLDINGS, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF OCTOBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5629427 8300

141346049

Jeffrey W Bullock, Secretary of St AUTHENTYCATION: 1818748

DATE: 10-29-14

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