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DATE: 03-13-15

NAME: SIMPLER NORTH AMERICA, LLC

TYPE OF FILING: APPLICATION FOR AUTHORIZATION

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:

Registration Section

Divisio	on of Corporations				
SUBJECT:		er North America, LL	<u>C</u>		
The enclosed "A Existence, and o	Application by Foreign Limited Liab check are submitted to register the al	ility Company for Authorization to	to Transact Business in Florida," Cability company to transact busine	Certificate of ss in Florida	f
Please return all	correspondence concerning this ma	tter to the following:			
	В	rittany Tollinchi			
		Name of Person			
	National C	orporate Resea	rch, Ltd. ≱₂	<u>à</u>	
		Firm/Company	50	- 51 ⊇ 5 ***	7
	11	1 W. Washingto	n ETAN	20	a rr:: wr:
		Address	(No.	PH	errys.
	Chicago, IL 60602		- tus	eau:	
		City/State and Zip Code	<u> </u>	12.	A
	btolling	hi@nationalcor	p.com		
		(to be used for future annual report r			
For further info	rmation concerning this matter, plea	se call:			
	Brittany Tollinchi	at (866)	775-0112		
	Name of Contact Person	Area Code	Daytime Telephone Number		
Divisio Registr P.O. B	ING ADDRESS: on of Corporations ration Section ox 6327 assee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
	check for the following amou 5.00 Filing Fee \$130.00 Filin Certificate of	g Fee & 🔲 \$155.00 Filing Fee	e &\$160.00 Filing Fee, Cer of Status & Certified Co		

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

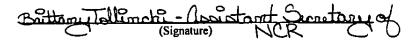
IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: Simpler North America, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") 46-5500172 Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) One North Dearborn, #1440 Chicago, IL 60602 (Street Address of Principal Office) Same (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: James Bolotin, Vice President, One North Dearborn, #1440 Chicago, IL 60602 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.817.155, F.S.) James Bolotin 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:			
Simpler North America, LLC			
If unavailable, the alternate to be used in the state of Florida is:			
	_ <u>=</u>	क्त	
2. The name and the Florida street address of the registered agent and office are:			
National Corporate Research, Ltd., Inc.	TRE PARY OF S AHASSEE, FL	$\frac{1}{\omega}$	(ह क्या 1 1 120 क्यू
(Name)	. F [3]	PMF	i g
155 Office Plaza Drive	STATE	L: 57	£ Jenna
Florida Street Address (P.O. Box NOT ACCEPTABLE)	Þ		
Tallahassee _{FL} 32301			
City/State/7in			

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)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HERBY CERTIFY "SIMPLER NORTH AMERICA, 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 SIXTH DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SIMPLER NORTH AMERICA, LLC" WAS FORMED ON THE FIRST DAY OF APRIL, A.D. 2014.

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

15 MAR 13 PM L: 57
SECRETARY OF STATE

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AUTHENTICATION: 2177007

DATE: 03-06-15

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