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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)205-8842

Fax Number

: (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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Foreign Limited Liability Company Magnus Pacific, LLC

Certificate of Status	1
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K. SALY EXAMINER JUL -6 2015

7/2/2015

COVER LETTER

TO:	Registration Section Division of Corporation	01			
QI ID ITA	CT: Magnus Pacific, LL	c			
JUNUE	C1.	Name of Limi	ed Liability Company		
				Transact Business in Florida," Certifility company to transact business in	
Please re	etum all correspondence o	concerning this matter to th	e following:		
		стс	orporation System		
		1	Name of Person		
			orporation System		
			?im/Сотралу		
	208 9	LaSalle st S		·	
			Address		
	Chica	go, IL 60604			
		City/i	State and Zip Code		
		E-mail address: (to be use	d for future annual report not	fication)	
For forth	er information concerning	·	•	,	
		, , F v			
,	Bruce Diettert		_at (916) 462-	6400 Daytimo Telephone Number	
	Name o	f Contact Person	Area Code	Daytime Telephone Number	
	MAILING ADDRESS:		ET ADDRESS:		
	Division of Corporations Registration Section		on of Corporations ration Section		
	P.O. Box 6327		Building		
•	Tallahassee, FL 32314		xecutive Center Circle assee, FL 32301		
Enclose	ed is a check for the f	ollowing amount:			
	S125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	s \$160.00 Filing Fee, Certificat of Status & Certified Copy	łe

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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:

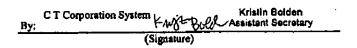
If name unavailable, enter alternate namiability Company," "L.L.C," or "L.L.C."	e adopted for the purpose of transacting business in Florida. The alternate name must include "Lis"	nited
Delaware	2 26-3817615	
Jurisdiction under the law of which for company is organized)		-
	_	حـ
(D (See s	ate first transacted business in Florida, if prior to registration.) ections 605.0904 & 605.0905, F.S. to determine penalty liability)	2
6558 Loneiree Blvd., Rocklin, C	A 95765	1
	A. S. S.	• `
	(Street Address of Principal Office)	.
6558 Lonetree Blvd., Rocklin, CA	195765	برنجر در
•		
		7.1
• •	(Mailing Address) and address of the person(s) who has/have authority to manage is/are:	
	,	
• •	,	
• •	,	
e Attachment Attached is an original certif	and address of the person(s) who has/have authority to manage is/are:	icia
Attached is an original certif	and address of the person(s) who has/have authority to manage is/are: icate of existence, no more than 90 days old, duly authenticated by the offe jurisdiction under the law of which it is organized. (A photocopy is not	
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Attached is an original certificate is in the ceptable. If the certificate is in the ceptable.	and address of the person(s) who has/have authority to manage is/are: icate of existence, no more than 90 days old, duly authenticated by the offe jurisdiction under the law of which it is organized. (A photocopy is not	
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Attached is an original certificity ving custody of records in the ceptable. If the certificate is it ust be submitted)	and address of the person(s) who has/have authority to manage is/are: icate of existence, no more than 90 days old, duly authenticated by the offe jurisdiction under the law of which it is organized. (A photocopy is not	slate
Attached is an original certificate is it ust be submitted)	icate of existence, no more than 90 days old, duly authenticated by the off e jurisdiction under the law of which it is organized. (A photocopy is not in a foreign language, a translation of the certificate under oath of the trans. Signature of an authorized person execution of this document constitutes an affirmation under the penalties of perjury than the facts stated here.	slate

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	f the Limited Liability	Company is:	
Magnus Pacific,	rtc		······
If unavailable,	the alternate to be use	d in the state of Florida is:	
			285 Jul 77
2. The name a	nd the Florida street a	ddress of the registered agent and office are:	
	CT Corporation System	1	2 7
		(Namo)	発見で
	1200 South Pine Island		
	Florida St	treet Address (P.O. Box NOT ACCEPTABLE)	• • •
	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)

7/2/2015 3:31:53 PM From: To: 8506176383(5/6)



ATTACHMENT TO

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

MAGNUS PACIFIC, LLC

MANAGERS:

Name	Address
Bruce Diettert	6558 Lonetree Blvd., Rocklin, CA 95765
Rima Franklin	2122 York Road, Suite 200, Oak Brook, IL 60523
Kyle Johnson	2122 York Road, Suite 200, Oak Brook, IL 60523
Louay Owaidat	6558 Lunetree Blvd., Rocklin, CA 95765

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Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "MAGNUS PACIFIC, 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 SECOND DAY OF JULY, A.D. 2015.

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

2015 JUL -2 AM 10: 19

5719009 8300

151003574

You may worify this cortificate online at corb. dolaware.gov/authvor.shtml

jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 2522295

DATE: 07-02-15