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## **COVER LETTER**

TO:

	ation Section n of Corporation	ns				
Pas SUBJECT:	sage Technology	LLC			•	
		Name of I	Limited Liability	Company		_
		reign Limited Liability Comp d to register the above refere				
Please return all	correspondence o	concerning this matter to the	following:			
	BRENT GOSS	ETT ·				
	<del> </del>	Na	ame of Person		· · · · · · · · · · · · · · · · · · ·	
	Passage Techno	blogy LLC				
		Fi	rm/Company			
	100 S. Saunders Rd, Ste 150					
Address						<del></del>
	Lake Forest, Ill	inois 60045				
		City/Si	ate and Zip Code		· .	<del>_</del>
	lc-members@pa	<del>-</del>			•	1.
		E-mail address: (to be used	for future annua	l report not	tification)	<del></del>
For further inform	mation concernin	g this matter, please call:			٠	•
BRENT	GOSSETT		224 at (	552-00	77	
	Name o	f Contact Person	Area Code	Day	rtime Telephone Number	
Divisior Registra P.O. Bo	NG ADDRESS: n of Corporations ation Section x 6327 (see, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding cutive Center Circle iee, FL 32301	
Enclosed is a che  ☐ \$125.	ck for the follow 00 Filing Fee	ing amount:  ☐ \$130.00 Filing Fee &  Certificate of Status	□ \$155.00 Filir Certified Copy	ng Fee &	\$160.00 Filing Fee, of Status & Certified C	Certificate opy

## 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:

Passage Technology LLC	
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "L	LC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name is Liability Company," "L.L.C," or "LLC.")	nust include "Limited
2. Illinois 3. 26-2847367	
(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)  100 S. Saunders Rd, Suite 150	
Lake Forest, IL 60045	
(Street Address of Principal Office)	
6. 100 S. Saunders Rd, Suite 150	
Lake Forest, IL 60045	
(Mailing Address)	
7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: Passage Technology LLC to Brent Gosset	<del>**</del> <b>5</b>
Office Address: 495 Grand Blud, Suffe 206	
Miramar Beach, Florida 32550 (Zip code)	ASSE NAME OF THE PROPERTY OF T
Registered agent's acceptance:	Ta R M
Having been named as registered agent and to accept service of process for the above stated corporation at	the place designated in
this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I fur with the provisions of all statutes relative to the proper and complete performance of my duties, and I am fa the obligations of my position as regis <u>te</u> red agent.	meragree to comply miliar with and accept
the volgations of my position as registered agent.	
(Registered agent's signature)	
8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
Brent Gossett, Executive Director, 710 Northwind Ln, Lake Villa, IL 60046	
Jerome Reid, Executive Director, 1588 Cypress Pointe Dr, Vernon Hills, IL 60061	
Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having cus urisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the	tody of records in the e certificate under oath
of the translator must be submitted)	

his document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Brent Gossett

Signature of an authorized person



## To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

PASSAGE TECHNOLOGY LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JUNE 26, 2008, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 11TH

day of AUGUST A.D. 2015

Authentication #: 1522301614 verifiable until 08/11/2016
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE