M15000008180

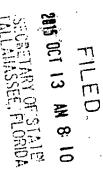
(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								

Office Use Only



800277111698

09/18/15--01032--009 **130.00



COVER LETTER

Registration Section
Division of Corporations

TQ:

SUBJECT:	BIADGI LLC									
SCDSEC1.		Name of Limited Liability Company								
					nsact Business in Florida," Corpany to transact busines					
Please return	all correspondence c	oncerning this matter to the	following:							
	Rodney Hureau									
•										
	Biadgi LLC									
	401 N. Michiga	01 N. Michigan Avenue Ste 1200 Address								
Address										
	Chicago IL 60611									
City/State and Zip Code										
	rodney@biadgi.co	om								
E-mail address: (to be used for future annual report notification)										
For further in	nformation concerning	this matter, please call:								
Roo	iney Hureau		646 at (8842528)	8					
	Name of	Contact Person	Area Code	Dayı	time 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 Tallahassee, FL 32301		of Corporations on Section uilding cutive Center Circle						
	check for the followi 125.00 Filing Fee	ng amount: \$\begin{align*} \begin{align*} a	□ \$155.00 Filin	ıg Fee &	☐ \$160.00 Filing Fee, Cert of Status & Certified Copy					



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 21, 2015

RODNEY HUREAU 401 N. MICHIGAN AVENUE STE 1200 CHICAGO, IL 60611

SUBJECT: BIADGI LLC

Ref. Number: W15000062237

We have received your document for BIADGI LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

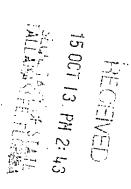
You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 715A00019822



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:

1. BIADGI LLC (Name of Fore	eign Limited Liability Company; mus	t inclu	de "Limited Lia	bility Company," "L.L.C	.," or "LLC.")	
(If name unavailable, enter a Liability Company," "L.L.C,	Iternate name adopted for the purpose	of tre	nsacting busines	s in Florida. The alterna	te name must inc	:lude "Limited
2. Chicago ILLINOIS 606	•	_	465273104			
(Jurisdiction under the law company is organized)	of which foreign limited liability	3.		(FEI number, if appli	cable)	
A						
T.	(Date first transacted busine (See sections 605.0904 & 605.	ss in F	lorida, if prior to	registration.)		
5. 401 N. Michigan Aven		0,000,	i.s. to determine	penany naominy)		
Chicago IL 60611						
	(Street Address of F	rincip	al Office)	<u> </u>		
6. 401 N. Michigan Aven	ue, Şte 1200					548 3
Chicago IL 60611						E 9 7
<u>, , , , , , , , , , , , , , , , , , , </u>	(Mailing A	Addres	s)			景当日
7. Name and street address	ss of Florida registered agent: (P.	O. Bo	x <u>NOT</u> accept	able)		SSE 3
Name:	Beatrice Hureau			-		E H
Office Address:	101 Plaza Real South #706					OFF P
	Boca Raton			- , Florida ³³⁴³²		5000
Registered agent's accep	(City)	,		(Zip cod	le)	
designated in this applica to complywith the provisi	gistered agent and to accept serv tion, I hereby accept the appoint ons of all statutes relative to the my position as registered agent. (Regista	ment prope	as registered a	gent and agree to act	in this capacity	y. I further agree
•	acity and address of the person(s)	who l	as/have author	ity to manage is/are:		
Rodney Hureau	Owner, Plana	96	u			
401 N. Michigan Avenue,	Ste 1200	<i>0</i>			 	
Chicago IL 60611						
	- TZHUR	ertifica		gn language, a translat		
This document is executed submitted in a document to	l in accordance with section 605.0 o the Department of State constitu	203 (tes a t	l) (b), Florida S hird degree felo	Statutes. I am aware the	at any false info s.817.155, F.S.	ormation

File Number

0475217-1



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

BIADGI LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON APRIL 02, 2014, 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 14TH day of SEPTEMBER A.D. 2015.

Authentication #: 1525702794 verifiable until 09/14/2016
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE