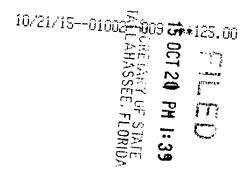
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COVER LETTER

TO:

TO:	Registration Section Division of Corporations		
SUBJI	VacayStay Connect, LLC		
50201	Name of Limited Liability Company		
	closed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Floce, and check are submitted to register the above referenced foreign limited liability company to transact		
Please	eturn all correspondence concerning this matter to the following:		
	Sunil Aluvita		
	Name of Person		
	VacayStay Connect, LLC		
Firm/Company			
	200 West Madison Street, Suite 650		
	Address		
	Chicago, IL 60606		
	City/State and Zip Code		
	mweinstein@vacaystayconnect.com		
	E-mail address: (to be used for future annual report notification)		
For fur	her information concerning this matter, please call:		
	Sunil Aluvila 847 784-9997 at ()		
	Name of Contact Person Area Code Daytime Telephone Num	ber	
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		
Enclose	d is a check for the following amount: ■ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee Certificate of Status Certified Copy of Status & Certified		

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: VacayStay Connect, 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.") Illinois (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability 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) 200 West Madison Street, Suite 650 Chicago, IL 60606 (Street Address of Principal Office) same as principal office (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) CHARLES D. PATTON Name: 6045 LEXINGTON PARK Office Address: ORLANDO ____ , Florida _ **3 &** Registered agent's acceptance: 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 application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations 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: Sunil Aluvila, CEO, 200 West Madison Street, Suite 650, Chicago, IL 60606 9. Attached is a 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. (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 This 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.

Typed or printed name of signee

Sunil Aluvila

File Number

0379357-5



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

VACAYSTAY CONNECT, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 06, 2011, 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 1ST day of OCTOBER A.D. 2015.

Authentication #: 1527402586 verifiable until 10/01/2016

Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE