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#### **COVER LETTER**

TO:

**Registration Section** 

Div	ision of Corporation	18				
SUBJECT:	Keating Resources,	LLC				
		Name of	Limited Liability	Company		
					ansact Business in Florida," C y company to transact busine	
Please return	all correspondence of	concerning this matter to the	following:			
	Brian J. Thanas	siu				
	<del></del>	N	ame of Person			
	Cheffy Passido	mo, P.A.				
	Firm/Company					
	821 Fifth Aven	ue South				
			Address	, ,		
	Naples, FL 34	102				
		City/S	tate and Zip Code		# 4a-tr	
	bjthanasiu@napl	eslaw.com				
	.===	E-mail address: (to be used	d for future annual	report not	ification)	
For further in	nformation concerning	g this matter, please call:				
Bri	an J. Thanasiu		239 at (	261-93	00	
<del></del>	Name o	f Contact Person	Area Code	Day	time Telephone Number	
Div Reg P.O	ision of Corporations istration Section Box 6327 ahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding ecutive Center Circle see, FL 32301	
	check for the follow 125.00 Filing Fee	ing amount:  ☐ \$130.00 Filing Fee &  Certificate of Status	□ \$155.00 Filir Certified Copy	ng Fee &	■ \$160.00 Filing Fee, Cert of Status & Certified Copy	

## 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:

(Name of Fore	eign Limited Liability Company; mus	it inch	ude "Limited Lis	sbility Company," "L.L.C.," or "	LLC.")
If name unavailable, enter al liability Company," "L.L.C,"	iternate name adopted for the purpose " or "LLC.")	of tr	ansacting busine	ss in Florida. The alternate name	e must include "Limited
Illinois	·	3.	20-4250439		
	of which foreign limited liability			(FEI number, if applicable)	
	(Date first transacted busine (See sections 605.0904 & 605.	ss in	Florida, if prior t	o registration.)	
5. 9128 Strada Place, Sui	·			to penalty statemy	
Naples, FL 34108	70.			······	
9128 Strada Place, Suit	(Street Address of i	'rıncı]	pai Office)		
Naples, FL 34108					
Tupics, 10 54100	(Mailing)	Addre	ess)		
7. Name and street addres	ss of Florida registered agent: (P.	о. в	ox <u>NOT</u> accep	etable)	
Name:	Cheffy Passidomo, P.A.			_	
Office Address:	821 Fifth Avenue South			Print	
	Naples			, Florida 34102	
Registered agent!s accep	(City)			(Zip code)	
designated in this applicate complywith the provisi	gistered agent and to accept servition, I hereby accept the appoint ons of all statutes relative to the my position as registered agent.	ment	t as registered	agent and agree to act in this	s capacity. I further agree
		_			and the same
	(Regist	ered a	igent's signature	Brian T. Thunasc	m 50
8. The name, title or capa	acity and address of the person(s)	who	has/have author	ority to manage is/are:	
Gerard Keating, Manager	·				
9128 Strada Place, Suite	10115				
Naples, FL 34108					
	of existence, no more than 90 da of which it is organized. (If the cubmitted)				
	Signature	ឲ្យពា	authorized pers	21	
	d in accordance with section 605.0 the Department of State constitu				
	Gerard Keating				

Typed or printed name of signee

### File Number

0175544-7



### 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

KEATING RESOURCES, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON FEBRUARY 01, 2006, 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 17TH

day of

MAY

A.D.

2016

Authentication #: 1613800452 verifiable until 05/17/2017
Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE