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COVER LETTER

Registration Section

TO:

Divisi	ion of Corporatio	ns						
SUBJECT:	Boulder Legal Serv	rices, LLC						
	Name of Limited Liability Company							
		reign Limited Liability Comp ed to register the above refere						
Please return a	Il correspondence	concerning this matter to the	following:	•				
	Charlotte M. F	Coork						
		N	ame of Person			_		
	Horwood, Ma	cus & Berk						
	, , , , , , , , , , , , , , , , , , , ,	Fi	rm/Company		120	132	ಕ	
	500 W Madiso	on St., Ste. 3700				- <u>CSE</u>		П
	Address 25 20							
	Chicago IL 60661						3	
		City/S	tate and Zip Code		,		<i>چې</i>	
	croork@hmblav	v.com			Ī	Z m	Z.	
		E-mail address: (to be used	d for future annual	report not	ification)	_		
For further info	ormation concerning	ng this matter, please call:						
Charl	lotte M. Roork		312 at (281 111	15			
	Name	of Contact Person	Area Code	Day	time Telephone Numbe	r		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registrati Clifton Bia 2661 Exe	ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301				
	heck for the follow 25.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ng Fee &	□ \$160.00 Filing Fee of Status & Certified (ficate	

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.

	USINESS IN THE STATE OF FLORID	M:	
1. Boulder Legal Group, Name of Ford		ust include "Limited Liability Company," "L.L.C.," o	or "LLC.")
Liability Company," "L.L.C,	Iternate name adopted for the purpor ," or "LLC.")	se of transacting husiness in Florida. The alternate na	me must include "Limited
2. Missouri		3. not applicable	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable	c)
4. March 1, 2016			
	(Date first transacted busin (See sections 605,0904 & 60)	tess in Florida, if prior to registration.) 5.0905, F.S. to determine penalty liability)	_ AESE 6
5 202 SW Market Street			58
··			
Lee's Summit, MO 640			_ 多意 2 〒
500 W Madian Ox 43	(Street Address of	Principal Office)	176 O in
6. 500 W Madison St., #3	700		- jag 로 U
Chicago, IL 60661			85 4
	(Mailing	Address)	
7. Name and street address	s of Florida registered agent: (P	O Box NOT accentable)	320 10
	NRAI Services Inc.	.o. box rot acceptable)	
Name:	MAAT SCIVICES INC.	<u> </u>	
Office Address:	1200 South Pine Island Road		
	Plantation	, Florida 33324	
Registered agent's accept	(City)	(Zip code)	_
Having been named as rej designated in this applica- to complywith the provision	gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the ny position as registered agent.	rvice of process for the above stated limited liab itment as registered agent and agree to act in the proper and complete performance of my dutie tered agent's signature) LETA SINGLETOR	his capacity. I further agree is, and I am familiar with an
8. The name, title or capa	icity and address of the person(s)) who has/have authority to manage is/are:	
Rick Gustafson, Member,	211 W. Wacker Dr., 3rd Floor,	Chicago IL 60606	
Camron Hoorfar, Member	, 202 SW Market Street, Lee's S	Summit, MO 64063	
	of which it is organized. (If the c	ays old, duly authenticated by the official having tertificate is in a foreign language, a translation of	
			- .
	Signature	of an authorized person	
		0203 (1) (b), Florida Statutes. I am aware that an	

Ati P. Khatri, Authorized Agent

Typed or printed name of signes

STATE OF MISSOURI



Jason Kander Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, JASON KANDER, Secretary of State of the STATE OF MISSOURI, do hereby certify that the records in my office and in my care and custody reveal that

Boulder Legal Group, LLC LC001461169

was created under the laws of this State on the 13th day of September, 2015, and is active, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 1st day of June, 2016.

Secretary of State

Certification Number: CERT-06012016-0021



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