1/16000005479

| (Requestor's Name) | | | | | |
|---|-------------------|-----------|--|--|--|
| (Address) | | | | | |
| (Ad | dress) | | | | |
| (Cit | y/State/Zip/Phone | e #) | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| Certified Copies | Certificates | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
| | | | | | |
| | | | | | |
| | ~~· | | | | |
| WU6-4578 | | | | | |

Office Use Only



400286991024

06/27/16--01019--015 **125.00

2016 JUL -7 PHI2: 50

K. SALY EXAMINER



June 28, 2016

MICHAEL RILEY 303 WEST MADISON ST, STE. 1650 CHICAGO, IL 60606

SUBJECT: NATIONAL FIBER SUPPLY CO. L.L.C.

Ref. Number: W16000045787

We have received your document for NATIONAL FIBER SUPPLY CO. L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

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.

Letter Number: 916A00013649

Karen A Saly Regulatory Specialist II

www.sunbiz.org

COVER LETTER

្ទ

TO:

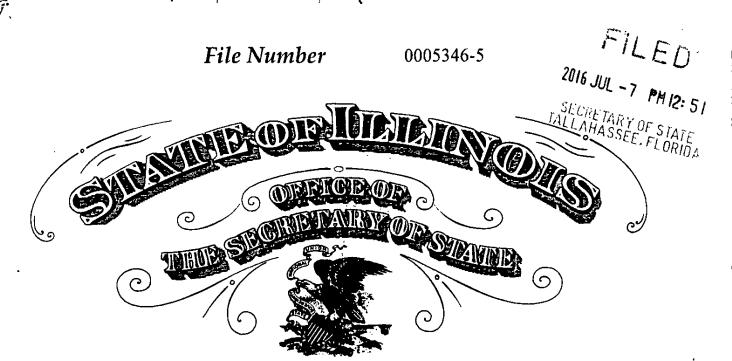
| TO: | | tion Section of Corporation | ıs | | | | |
|--------------|-----------------------------------|---|---|------------------------------------|--|---|--|
| SUBJE | | TIONAL FIBER | SUPPLY L.L.C | | | | |
| | | | Name of I | Limited Liability (| Company | | |
| | | | eign Limited Liability Comp d to register the above refere | | | | |
| Please 1 | return all c | orrespondence c | oncerning this matter to the | following: | | | |
| | | MICHAEL RIL | EY | | | | |
| | | · · · · · · · · · · · · · · · · · · · | Ne | ame of Person | | | |
| | | NATIONAL FI | BER SUPPLY L.L.C | | | | |
| Firm/Company | | | | | | | |
| | | 303 WEST MA | DISON STREET, SUITE 10 | 650 | | | |
| | | | | Address | | | |
| | | CHICAGO, IL | 60606 | | | | |
| | | | City/St | tate and Zip Code | | | |
| | 1 | MIKE@NATFB | R.COM | | | | |
| | _ | | E-mail address: (to be used | for future annual | report not | ification) | |
| For furt | ther inform | ation concerning | g this matter, please call: | | | | |
| | місна | EL RILEY | | 312 at (| 346-480 | 00 | |
| | | Name o | f Contact Person | Area Code | Day | time Telephone Number | |
| | Division Registrat P.O. Box | NG ADDRESS: of Corporations tion Section t 6327 see, FL 32314 | | | Division of Registrati Clifton B 2661 Exe | ADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301 | |
| Enclose | | ck for the follow 00 Filing Fee | ing amount: ☐ \$130.00 Filing Fee & Certificate of Status | □ \$155.00 Filin Certified Copy | g Fee & | ☐ \$160.00 Filing Fee, Co of Status & Certified Cop | |

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 COMPANYTOTRANSACT RI ISINESS. IN THE STATE OF FLORIDA:

| NATIONAL FIBER SU (Name of Fore | JPPLY L.L.C ign Limited Liability Company; n | ust incl | ude "Limited Lia | bility Company," "L.L.C.," or | "BLC:") |
|--|---|----------------------|--|--|---|
| If name unavailable, enter al- isbility Company," "L.L.C," | ternate name adopted for the purp | se of tr | ansacting busines | s in Florida. The alternate nam | ne must include "Limited |
| , ILLINOIS | or boc. , | _ | 36-2642056 | | |
| (Jurisdiction under the law company is organized) | of which foreign limited liability | 3. | • = = = = = = = = = = = = = = = = = = = | (FEI number, if applicable) | |
| J | | | | | - |
| | (Date first transacted busi (See sections 605.0904 & 60 | ness in I 5.0905, | Florida, if prior to F.S. to determin | registration.) e penalty liability) | 7 73 |
| 303 WEST MADISON | STREET, SUITE 1650 | | | | 2016 JUL -7 PH 12: 51 SECRETARY OF STATE TAILLAND SEE, FLORIT |
| CHICAGO, IL 60606 | | | | | 五二 「 |
| | (Street Address o | f Princi | pal Office) | | - (35 ⁴) - |
| 303 WEST MADISON | STREET, SUITE 1650 | | | | F10 3 |
| | | _ | | | 75 75 |
| CHICAGO, IL 60606 | (Mailin | Addre | ae) | | - 35 5 |
| | • | • | • | | <u> </u> |
| . Name and <u>street addres</u> | s of Florida registered agent: (| P.O. B | ox <u>NOT</u> accep | table) | |
| Name: | NOAH WOODY | | | _ | |
| Office Address: | 13745 ALESBURY CT | | | _ | |
| | JACKSONVILLE | | | _, Florida <u>32224</u> | • |
| | (City) | | | (Zip code) | _ |
| lesignated in this application complywith the provision | gistered agent and to accept so tion, I hereby accept the appoo ons of all statutes relative to the my position as registered agen | ntmeni e propi | t as registered a | igent and agree to act in the | is capacity. I further agr |
| | That h. W. | my | | | _ |
| | (Reg | steppe a | igent's signature) | | |
| The name, title or capsMICHAEL RILEY, MAN | acity and address of the person NAGING MEMBER | s) who | has/have autho | rity to manage is/are: | |
| 1027 OAKLAND DR | | · | | | |
| BARRINGTON, IL 6001 | | | | | |
| D/4441101011, 12 0001 | <u> </u> | | | | |
| Attached is a certificate urisdiction under the law of the translator must be so | of existence, no more than 90 of which it is organized. (If the ubmitted) | days old | d, duly authenti | cated by the official having gn language, a translation o | custody of records in the f the certificate under oath |
| | Signati | re of an | authorized perso | n | _ |
| This document is executed to built the comment to t | d in accordance with section 60 the Department of State const | 5.0203 itutes a | (1) (b), Florida third degree fel | Statutes. I am aware that an ony as provided for in s.817 | y false information .155, P.S. |
| | MICHAEL RILEY | | _ | | |

Typed or printed name of signee



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

NATIONAL FIBER SUPPLY L.L.C., HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 29, 1995, 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 15TH 2016

day of

JUNE

A.D.

Authentication #: 1616702570 verifiable until 06/15/2017

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

SECRETARY OF STATE