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## COVER LETTER

TO: Registration Section Division of Corporat	ions			
CUDIECT.	FD Group 8 LLC, an	Indiana limited liability com	npany	
SUBJECT:	Name of	Limited Liability Company		•
The enclosed "Application by I Existence, and check are submi	Foreign Limited Liability Comp ted to register the above refer	pany for Authorization to To enced foreign limited liabili	ransact Business in Florida,' ty company to transact busin	' Certificate of ness in Florida
Please return all correspondence	e concerning this matter to the	following:		
	F	Briana O'Neill		
<del></del>	N	lame of Person		-
	D	Pubin Singer PC		
	F	irm/Company	25	10
	123 N. V	Wacker Drive, Suite 1600		
		Address	SS	
	Chi	icago, IL 60606	Fig.	IN THE D
	City/S	State and Zip Code		
	rdubin	@dubinsinger.com	SA	f
	E-mail address: (to be use	d for future annual report no	otification)	•
For further information concern	ning this matter, please call:			
Bri	ana O'Neill	312 at ( )	801-8750	
Nam	e of Contact Person	Area Code Da	ytime Telephone Number	-
MAILING ADDRES  Division of Corporation Registration Section P.O. Box 6327  Tallahassee, FL 32314	ons	Divisior Registra Clifton 2661 Ex	T ADDRESS: n of Corporations ttion Section Building tecutive Center Circle ssee, FL 32301	
Enclosed is a check for the foll  ■ \$125.00 Filing Fee		□ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, C of Status & Certified Co	

To: George (Chicago) Fax: +1 (312, 9511283 Page 13 of 17 07/07/2018 10:85 AM

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 603.0902 FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY

COMPANT TO TRANSACT BOSINES			
Name of Foreign Li	FD Group 8 LLC inited Liability Company; must include "Limit	ed Liability Campany ""L.L.C. " ou"	IIC"
(11200 011 010 01	miles Electricy Company ( mass moreon Electric	on the city of the city of	<u> </u>
(If name unavailable, enter alternate Liability Company," "L.L.C," or "I	unne adopted for the purpose of transacting I	nusiness in Flerida. The alternate name	nust include "Limited
ndiana Indiana	٦		
(Jurisdiction under the law of whitename)	ch foreign limited liability	(FEI number, il applicable)	
1	February 17, 2016		
(	(Date first transacted business in Florida, if p See sections 605.0904 & 605.0905, F.S. to det	prior to registration.) termine penalty liability)	
)	875 N. Michigan Avenue, Suite 36	12	
	Chicago, IL 60611		SE SE
	(Street Address of Principal Office)		三 55
	875 N. Michigan Avenue, Suite 361	2	
	Chicago, IL 60611		25 12 E
-	(Mailing Address)	<del></del>	
. Name and street address of F	lorida registered agent; (P.O. Box <u>NOT</u> 1	acceptable)	
Name;	Marilyn Solomon		SA F
Office Address:	6564 Summerset Court		• • •
	Boca Raton	, Florida 33496	
	(City)	(Zip code)	
tesignated in this application, I	ed agent and to accept service of process hereby accept the appointment as registed all statutes relative to the proper and consistion as registered agent.  (Registered gent's sight	red ugent and agree to act in this optete performance of my duties,  Selown	capacity. I further agree
	•		
8. The name, title or capacity as	ad address of the person(s) who has/have a	suthority to manage is/are:	
	George Novogroder, Manager		
	875 N. Michigan Avenue, Suite 3612		
	Chicago, IL 60611		<u>-</u>
Attached is a certificate of exi- urisdiction under the law of whi If the translator must be submitte		foreign language, a translation of	islody of records in the the certificate under oath
	Silmature of an authorized	person	
	cordance with section 605.0203 (1) (b), Florepartment of State constitutes a third degree		
	George Novagroder		

## State of Indiana Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

FD GROUP(8 LLC

duly filed the requisite documents to commence business activities under the laws of the State of

Indiana on December 07, 2015, and was in existence or authorized to transact business in the State of Indiana on July 06, 2016.

I further certifive this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, July 06, 2016

Corrie Lauron

CONNIE LAWSON
SECRETARY OF STATE

2015120800014 / 201652489

Verify this certificate:https://bsd.sos.in.gov/ValidateCertificate