M16000007109

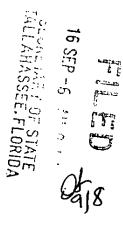
(Re	equestor's Name)			
— (Ac	ddress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone	→ #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Nan	ne)		
(Do	ocument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
/				





400289727724

09/06/16--01004--015 **130.00



COVER LETTER

TO: Registration Section
Division of Corporations

Rose Pallet, LLC

SUBJECT:	Name of I	Limited Liability (Company				
				nsact Business in Florida," Certificate company to transact business in Fl			
Please return all correspondence co	oncerning this matter to the	following:					
Michael Litobor	rski						
	Na	me of Person		· · · · · · · · · · · · · · · · · · ·			
Rose Manageme	ent Office						
Firm/Company							
7647 West 100t	h Place, Suite D						
	Address						
Bridgeview, IL	60455						
	City/St	ate and Zip Code					
Mlitoborski@rose	e-mgmt.com						
	E-mail address: (to be used	l for future annual	report not	ification)			
For further information concerning	this matter, please call:						
Michael Litoborski		708 at (529-22				
Name of	f Contact Person	Area Code	Day	time Telephone Number			
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exe	CADDRESS: of Corporations ion Section uilding recutive Center Circle ee, FL 32301			
Enclosed is a check for the following \$125.00 Filing Fee	ing amount: \$\mathbb{B}\$ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Certificate 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:

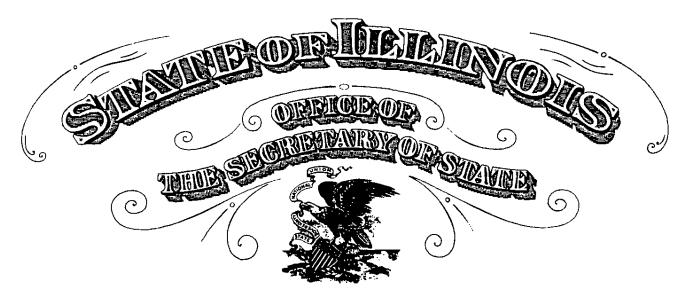
COMPLETE TO TRANSPORT BO	ORVESS RVITTE STATE OF TEORIGA.			
l. Rose Pallet, LLC				
	ign Limited Liability Company; must inclu	ide "Limited Liability Company," "L.L.C.," or	"LLC.")	
Rose Pallet Florida, LLC				 .
Liability Company," "L.L.C,'		insacting business in Florida. The alternate nar	ne must include "I	Limited
2. Illinois	3.	45-3916440		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
September 6, 2016			_ <u>}</u>	
	(Date first transacted business in F (See sections 605.0904 & 605.0905,	lorida, if prior to registration.) F.S. to determine penalty liability)	L A	-
5. 7647 West 100th Place			出る。上	Character Character Character
Bridgeview, IL 60455			Maria Cara	N N NEEDWAL
	(Street Address of Princip	al Office)		
6. 7647 West 100th Place,	, Suite D		701 71.5	
Bridgeview, IL 60455			STATE	
	(Mailing Addres	s)		
7 Name and street addres	s of Florida registered agent: (P.O. Bo	v NOT accentable)		
	Alan Rose	A <u>1.0.1</u> absorption		
Name:				
Office Address:	1475 Estuary Trl			
	Delray Beach	, Florida 33483-5962 (Zip code)		
	(City)	(Zip code)	_	
designated in this applicate to complywith the provision	gistered agent and to accept service of tion, I hereby accept the appointment ons of all statutes relative to the prope ny position as registered agent.	f process for the above stated limited liab as registered agent and agree to act in the rand complete performance of my dutie. Gent's signature)	is capacity. I fu	ırther agree
8. The name, title or capa	icity and address of the person(s) who l	has/have authority to manage is/are:		
Alan Rose, Managing Me	mber, 1475 Estuary Trl, Delray Beach,	FL 33483		
Mia Allen, Member, 1570	3 Glenlake Dr, Orland Park, IL 60467			
Amy Angellotti, Member,	, 222 North Columbus Suite 3309, Chia	cago, IL 60601		
9. Attached is a certificate jurisdiction under the law of the translator must be su	of which it is organized. (If the strifficular interest is a submitted)	duly authenticated by the official having ate is in a foreign language, a translation of	custody of record the certificate of	rds in the under oath
	Signature of an	authorized person		
This document is executed submitted in a document to	in accordance with section 605.0203 (the Department of State constitutes a t	1) (b), Florida Statutes. I am aware that an hird degree felony as provided for in s.81	iy false informati 7.155, F.S.	on

Typed or printed name of signee

Alan Rose

File Number

0373032-8



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

ROSE PALLET, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON NOVEMBER 22, 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 30TH day of AUGUST A.D. 2016.

Authentication #: 1624302688 verifiable until 08/30/2017
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE