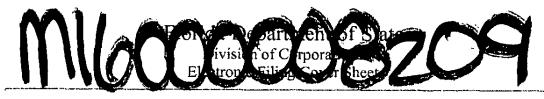
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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Foreign Limited Liability Company Zuke Enterprises, LLC - 2730/50 Lakeview

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	co	VER LETTER		
	egistration Section dvision of Corporations			
CYIB ID CT	ZUKB ENTERPRISES, LLC - 2730/50 LAKE	VIEW		
SUBJECT		Limited Liability	Company	
	ed "Application by Foreign Limited Liability Compand check are submitted to register the above refer			
Picase rotu	rn all correspondence concerning this matter to the	following:		
	Jeffrcy A. Zaluda, Esq.			
	N	ame of Person		
•	Horwood Marcus & Berk			
	Pi	rm/Company		
	500 West Madison Street, Suite 3700			
		· Address		
	Chicago, Illinois 60661	••		
	City/S jzaluda@hmblaw.com	tate and Zip Code		756 766
•	E-mail address: (to be used	for future annual	roport notification)	3 8
For furth or	information concerning this matter, please call:			
Je	effrey A. Zaluda, Esq.	312	606-3200	
•••	Name of Contact Person	Area Code	Daytime Telephone Number	
Di Re P.6	AILING ADDRESS: vision of Corporations egistration Section O. Box 6327 llahassee, PL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Talighassee, FL 32301	ŞA G
	a check for the following amount: \$125.00 Filing Fee	D 5155.00 Filir Certified Copy	ng Fee & \$\Bigsquare \\$160.00 Filing Fee of Status & Certified	

Pet of

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

, ZUKE ENTERPRISE	S, LLC - 2730/50 LAKEVIEW			
	reign Limited Liability Company; must hich	ude "Limited Liability Company," "L.L.C.," or	LLC.")	
Not Applicable				
(If name unavailable, enter a Liability Company," "L.L.C	alternate name adopted for the purpose of tri !" or "LLC.")	suspecting business in Florids. The alternate name	; must include "Limit	ed
2. Illinois	3	Not Applicable		
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)		
Date of Registration.	•			
Y1	(Date first transacted business in I	fords, if prior to registration.		
748 Thomas Court	(See sections 605.0904 & 605.0905,	r.5, to determine penany facoury)		
3.				
Libertyville, Illinois 6			•	•
748 Thomas Court	(Street Address of Princip	al Office)		
6. 748 Thomas Court				•
Libertyville, Illinois 6	0048			
· · ·	(Mailing Addres	4)	·.,	
7. Name and street addre	ss of Florida registered agent: (P.O. Bo	x NOT acceptable)		
Name	NRAI Services, Inc.	***	*	
••,," ••	1200 South Pine Island Road			
Office Address:				
2 100	Plantation	, Florida 33324		
Registered agent's accep	(City)	(Zip code)		
Having been named as re	gistered agent and to accept service of	process for the above stated limited liabili	ty company at the p	olace
aesignatea in inio applica to complywith the provisi	uon, I hereby accept the appointment ons of all statutes relative to the prope	as registered agent and agree to act in this r and complete performance of my duties,	capacity, I further and I am familiars	r agree Bith and
accept the obligations of	ny position as registered agent.			Y
	By: Michael Duran			2 -
		cnf's signature)		
2 The name title or can:	scity and address of the person(s) who l	softeus outhoritude monete is/one	14.7	<u>~ [</u>
Michael Zaccaro, Manage		manner authority to manage to are.	- 14.5g _	
				差 . `-
748 Thomas Court	·			
Libertyville, Illinois 6004	8			ርባ ፲
O Association and Manager	of automorphism -14	distributed has the acceptable beginning		41
		, duly authenticated by the official having ou are is in a foreign language, a translation of t		
of the translator must be su		11118		
		and the formula		
	Signature of an a	muorized beisou		
This document is executed	\	unorized person ,) (b), Florida Statutes. I am aware that any f	alse information	

Typed or printed name of signee

1514

File Number

0294132-5



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

ZUKE ENTERPRISES, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON MARCH 02, 2010, AND HAVING ESTABLISHED A SERIES WITH THE DESIGNATED NAME OF ZUKE ENTERPRISES, LLC - 2730/50 LAKEVIEW ON OCTOBER 05, 2016, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONED BY 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 OCTOBER

day of

A.D.

Authentication #: 1628701873 verifiable until 10/13/2017. Authenticate at: http://www.cyberdriveillinois.com

SECRÉTARY OF STATE