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DEC 21 2016 S. YOUNG TALLATIASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corpor			,		
suвјест: <u>КТД</u>	Illinois, LLC Name of I	imited Liability Company			
	y Foreign Limited Liability Comp mitted to register the above refere				
-	ence concerning this matter to the	_			
	anne Stavraka	ame of Person			
<u>K</u> T	G Illinois, LIC	rm/Company			
400	LW. Devonau	Address 410		.	30
Chic	ago, IL 60641 City/S	o tate and Zip Code		6 DEC 20	L VHV S
gabr	ago, IL 60641 City/Si 1010 E-mail address: (10 be used	M. CoM d for future annual report not	ification)	FM li:	
For further information conc	erning this matter, please call:			22	127
Cheorge	Stavrakas ame of Contact Person	at (<u>773</u>) <u>58</u> 6 Area Code Day	70-2500		
MAILING ADDR Division of Corpora Registration Section P.O. Box 6327 Tallahassee, FL 323	ations n	Division Registrat Clifton B 2661 Exe	of Corporations ion Section duilding ecutive Center Circle see, FL 32301		
Enclosed is a check for the f □ \$125.00 Filing F		☐ \$155.00 Filing Fee & Certified Copy	\$160.00 Filing Fee, C of Status & Certified Co		;

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 TRÁNSACT BUSINESS IN THE STATE OF FLORIDA: Illinois Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.." or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 60646 (Street Address of Principal Office) (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Dean Staurakus Name: Office Address: 2650 marina bay drive E. vit205 City), Florida 33312 (City) (Zip code) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. (Registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: stavrukar (runer) 4001 W. Devoname 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) Signature of an authorized person This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

To Ame STAVRAKAS

Typed or printed name of signee

File Number

0582825-2



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

KTG ILLINOIS, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JUNE 20, 2016, 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 16TH day of DECEMBER A.D. 2016 .

Authentication #: 1635101574 verifiable until 12/16/2017

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

Desse White

SECRETARY OF STATE