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(Re	equestor's Name)				
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PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Do	ocument Number)	_			
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO:	Registration Section Division of Corporations					
CIIDI	Whitetail Properties Real Estate LLC					
SUBJ	Name of Limited Liability Company					
	losed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of se, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.					
Please	eturn all correspondence concerning this matter to the following:					
	Dan Perez					
	Name of Person					
	Whitetail Properties Real Estate LLC					
	Firm/Company					
	121 S. Madison St.					
	Address					
	Pittsfield, IL 62363					
	City/State and Zip Code					
	invoice@whitetailproperties.com					
	E-mail address: (to be used for future annual report notification)					
For fu	ner information concerning this matter, please call:					
	Jeff Evans 217 285-9000 at ()					
	Name of Contact Person Area Code Daytime Telephone Number					
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301					
Enclos	d is a check for the following amount: □ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy □ \$160.00 Filing Fee, 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:

(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 "L.L.C." (See sections 605.0904 & 608.0905, F.S. to determine penalty liability) 5. 121 S. Madison St. Pittsfield, IL. 62363 (Street Address of Principal Office) Po Box 251 Pittsfield, IL. 62363 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Name: Office Address: NORTHIWEST REGISTERED AGENT LLC Office Address: (City) (City) (City) (City) Registered agent's acceptance: (City) (City) (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 age to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Dan Perez, manager 121 S. Madison St. Pittsfield, IL. 62363 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 out of the translator must be subsetted)	(Name of Fore	al Estate_LLC eign Limited Liability Company; must include "	'Limited Liability Company," "L.L.C.,"	or "LLC.")
(City) 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 placested this application. I hereby accept the application in the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent. Refishered agent sacrificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the pursishing to registered of the translation must be authentical to the translation must be authentical to the translation must be authenticated under our of the translation must be authenticated under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under out of the translator must be authentical to the translation must be authenticated by the official having custody of records in the pursisions of my position are registered agent. Signature up aparethorized person			cting business in Florida. The alternate n	ame must include "Limited
(Date first transacted business in Florida, if prior to registration.) (See sections 603.0904 & 605.0905, F.S. to determine penalty highlity) 5. 121 S. Madison St Pittsfield, IL 62363 (Street Address of Principal Office) 6. PO Box 251 Pittsfield, IL 62363 (Mailing Address) 7. Name and street address NORTHWEST REGISTERED AGENT LLC Office Address: 3030 N. ROCKY POINT DRIVE, STE 150A TAMPA TAMPA (City) (Registered agenet and agree to act in this capacity. I Jurther ag to complywith the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent's signature) 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Dan Perez, manager 121 S. Madison St. Pittsfield, IL 62363 Signature uj apaethorized person	, IL	3 26	5-2193086	
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This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information	Pittsfield, IL. 62363 9. Attached is a certificate jurisdiction under the law	of which it is organized. (If the certificate i	is in a foreign language, a translation	ng custody of records in the of the certificate under oath

Typed or printed name of signee

Dan Perez

File Number

0235267-2



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

WHITETAIL PROPERTIES REAL ESTATE, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON OCTOBER 15, 2007, 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 21ST day of DECEMBER A.D. 2016.

Authentication #: 1635602430 verifiable until 12/21/2017
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE