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I. HARRIS

#### **COVER LETTER**

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SUBJE		ANXUN LLC					
			Name of	Limited Liability	Company		
						ansact Business in Florida," y company to transact busin	
Please	return all	correspondence co	oncerning this matter to the	following:			
		Jing Liu					
			N	ame of Person			
		One Step Profes	sional Services LLC				
Firm/Company							
		2146B S Archer	Ave				
				Address			
		Chicago, IL 606	16				
		City/State and Zip Code					
		annaliu.mariaepa(	@gmail.com				
	•		E-mail address: (to be use	d for future annua	al report not	tification)	
For fur	ther infor	mation concerning	this matter, please call:				
	Anna l	Liu		312 at (	631-32	16	
		Name of	Contact Person	Area Cod	e Day	time Telephone Number	
	Divisio Registra P.O. Bo	NG ADDRESS: n of Corporations ation Section ox 6327 ssee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section duilding ecutive Center Circle see, FL 32301	
Enclose		eck for the followi .00 Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Fil Certified Copy		□ \$160.00 Filing Fee, Conference of Status & Certified Conference	

## 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 BI SINESS IN THE STATE OF FLORIDA:

1. QIANXUN LLC (Name of Fore	ign Limited Liability Company; mus	t include "Limited Lia	bility Company," "L.L.C.," or	"LLC.")	
(If name unavailable, enter all Liability Company," "L.L.C,"	ternate name adopted for the purpose 'or "LLC.")	of transacting busines	s in Florida. The alternate nam	e must include "Limi	ted
Illinois	,	330-0987164			
۷.	of which foreign limited liability	3	(FEI number, if applicable)		
4	(B) (C) (1)	) Til ( 120 )		-	
	(Date first transacted busines (See sections 605.0904 & 605.0	ss in Florida, if prior to 0905, F.S. to determin	registration.) e penalty liability)		
5. 332 S MICHIGAN AV	E #1032-L494			_	-
CHICAGO, IL 60604					
	(Street Address of P	Principal Office)		- <u>Ps</u> =	-
6. SAME		•			
D,					
	(Mailing A	M. duran			
	(Mailing F	(duress)		F 2	Parameter.
7. Name and street_addres	s of Florida registered agent: (P.	O. Box NOT accept	able)	PH 1:07	المبيدي
Name:	Registered Agents Inc.		_	<b>高品</b>	
Office Address:	3030 N. Rocky Point Dr. STE 1	50A			
<b>44</b>	Tampa		- Florida 33607		
	(City)		_ , Florida (Zip code)	_	
designated in this applicate to complywith the provision to the complywith the provision to the comply with the complex with the comply with the complex with t	tance: gistered agent and to accept serv tion, I hereby accept the appoint ons of all statutes relative to the my position as registered agent.	ment as registered a	gent and agree to act in thi e performance of my duties	is capacity. I furth	er agree
	(Registe	ered agent's signature)		-	
8. The name, title or capa YONG WANG MEN	acity and address of the person(s) MBER	who has/have author	rity to manage is/are:		
2146B S ARCHER AVE				<del></del>	
CHICAGO, IL 60616-151	14			<del> </del>	
	of existence, no more than 90 day of which it is organized. (If the coubmitted)		gn language, a translation of		

Typed or printed name of signee

YONG WANG

#### File Number

0627115-4



### 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

QIANXUN LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON APRIL 20, 2017, 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 28TH

day of

APRIL

A.D.2017

Authentication #: 1711801660 verifiable until 04/28/2018 Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE