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٠ د		Foreign Limited Liab 5320 South Tai		AHASSEE	L I SNY	TIL
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COVER LETTER

up recor	5320 South Tamps						
OBJECT:		Name of L	imited Liability C	lompany			
The enclosed Existence, and	"Application by Ford Leheck are submitted	eign Limited Liability Compo I to register the above referen	any for Authorizat need foreign limit	tion to Tran ed Hability	isact Rusiness in Florida," (company to transact busine	Certificate ss in Flori	of da
lease return	all correspondence e	oncerning this matter to the f	following:				
	Kathi Newell,	Paralegal					
		Nu	me of Person				
	The Inland Rea	l Estate Group, LLC					
		Fir	rm/Company		A	2017	
	2901 Butterfiel	d Road			AE	- -	
			Address		ASS	rı son	
	Oak Brook, Illi	inois 60523				. A	
		City/St	tate and Zip Code				
	newell@inlandg	-		···	ilication >	2	
		li-mail address: (to be used	d for tuture annua	героп пос	incation)	_	
For further is	iformation concernit	ig this matter, please call:					
Ku	thi Newell		630 at (218-80)			
	Name	of Contact Person	Area Code	Day	time Telephone Number		
Div Rep P.C	diling appress dision of Corporation distration Section D. Box 6327 lahassee, Ft. 32314			Division Registrat Clifton B 2661 Exc	ADDRESS: of Corporations ion Section uilding ceutive Center Circle see, FL 32301		
	a check for the follow \$125,00 Filing Fee	wing amount: \$130.00 Filing Fee & Certificate of Status	S155,00 Fili Certified Copy	ing Fee &	☐ \$160.00 Fiting Fee, C of Status & Certified Co	ertificate py	

4.

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

IN COMPLIANCE WITH SECTION 605 0902, FLORIDA STATUTISS, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

5320 South Tampa LL	C	0-17-18	 -	
(Name of Forci	n Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or	'L1,(C.'')		
	in Language Davids The alternate part	e must inch	nde "Limi	ited
If name unavailable, enter alte liability Company," "L.L.C."	ernate name adopted for the purpose of transacting business in Florida. The alternate name of "LLC.")	i iids		
2. Delaware	3. (FEI number, if applicable)			
(Jurisdiction under the law o company is organized)	(FEI number, if applicable)			
Upon filing.		-		
· ·	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)			
2901 Butterfield Road		_		
5. 2701 Hanter Held Treat	·			
Oak Brook, Illinois 603	Oak Brook, Illinois 60523 (Street Address of Principal Office)			
, 2901 Butterfield Road	(Million and Million and Milli	A H	2017 AUG	
D		NS I	<u> </u>	,
Oak Brook, Illinois 60	523 (Mailing Address)	- SE		; ——
	•		\triangleright	П
7. Name and street address	s of Florida registered agent: (P.O. Box NOT acceptable)	[- -	<u>ڊ</u>	
Name:	CT Corporation System		~>	
Office Address:	1200 South Pine Island Road	A	Ĺ	
Connect Address.	Plantation , Florida 33324			
	(City) (Zip code)	_		
designated in this application complywith the provision	gistered agent and to accept service of process for the above stated limited liab inion. I hereby accept the appointment as registered agent and agree to act in the instance of all statutes relative to the proper and complete performance of my dutle my position as registered agent. CT Corporation System (Registered agent's signature) Assistant	s, and I ar Bolden	n famille	e place her agroe is with as
e The some title or can	acity and address of the person(s) who has/have authority to manage is/are:			
Managing Member: 5	320 South Tampa Manager LLC, 2901 Butterfield Road, Oak Brook, Illinois 60	0523.	_	
intanaging interior				
			-	
			-	
9. Attached is a certificate jurisdiction under the law of the translator must be s	of existence, no more than 90 days old, duly authenticated by the official having of which it is organized. (If the certificate is in a foreign language, a translation abmitted) 5320 South Tampa LLC, a Delaware limited liability company By, 520 South Tampa Managor LLC, a Delaware limited liability company	****		
	Signature of an authorized person			
This document is execute submitted in a document t	d in accordance with section 605.0203 (1) (b), Fiorida Statutes, I am aware that a be the Department of State constitutes a third degree felony as provided for in s.8	ny false in 17.155, F.S	formation i.	a
<u></u>	By: Anthony A. Casaccio, President of managing member			
	Typed or printed name of signee			



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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "5320 SOUTH TAMPA LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE SIXTEENTH DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

at corp.delaware.gov/authver.s

Authentication: 203071367

Date: 08-16-17