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19542080845 From Ranae McGraw

9/29/2017

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Florida Department of State

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COVER LETTER

UBJECT:	Tethys G	roup, LLC		
_		roup, LLC Name of	Limited Liability Company	
he enclosed "s	Application by Fo	reign Limited Liability Con	pany for Authorization to T	ransact Business in Florida," Certific ity company to transact business in F
lease return all		concerning this matter to the		
	T	ethys Group,	LLC	
		1	vame of Person	
	And	dy Camp		
	·	F	irm/Company	
		s Group LLC		
	·	***************************************	Address	
	954 W.	Washington Blvd. S	uite 250 Ch≌ago IL	, 60607
		City/S	State and Zip Code	
	Andy.	Camp@tethysgrp	.com	
	·····	Camp@tethysgrp E-mail address: (to be use	d for future annual report no	otification)
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	Andy	C.O.M.) of Contact Person	m(312, 50	16 - 6006
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Division Registra P.O. Bo	NG ADDRESS: n of Corporation; ation Section to 6327 ssee, FL 32314		Division Registra Clifton I 2661 Ex	TADDRESS: of Corporations tion Section Building ecutive Center Circle see, FL 32301
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Name of Foreign	LLC Limited Liability Company; must include "Limi	ted Liability Company," "L.L.C.," or "L.C.	
off traine universitable onto alternate n	ame adopted for the purpose of transacting business in F	Irrita The thermals name most include "I include "	in the Committee of Committee of
> ILLINOIS) high tereign limited liability exampling in e-gaineed)	<1.099396	7
		3. 81-098396	nber, if applicable)
4. October2017	- '		
	(Date first transacted tolerages at Florids, if prior to (See sections 605 0904 A, 605 0905, F. Sicto detail		
5, 954 W. Washington B	Ivd. Ste. 250	6. 954 W. Washing	ton Blvd. Ste. 250
ChicagolL,60607	Allerina Contres)	ChicagoIL,60607	kires)
		<u> </u>	A SE
	\		平 38 元
7. Name and surget address	g of Florida registered agent: (P.O. Bo	x <u>NOT</u> acceptable)	P 2
Name:	C T Corporation System	1 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	Sing o m
Office Address:	1200 South Pine Island Road		五五 美口
	Plantation	Florida 53324 (Zip cc	98.7 8 0
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lesignated in this application comply with the provision	tance: gistered agent und to accept service of ion, I hereby accept the appointment to ons of all statutes relative to the prope.	process for the above stated limite as registered agent and agree to be	d liability company at the place t in this capacity. I further usees
Having been named as replexignated in this application of comply with the provision	tance: gistered agent and to accept service of tion, I hereby accept the appointment to tons of all statutes relative to the prope, of my position as registered agent, 3y: CT Corporation System	process for the above stated limite as registered agent and agree to acre and complete performance of my Jennifer Coinn	d liability company at the place t in this capacity. I further usees
Having been named as re- lesignated in this applicat o comply with the provision and accept the obligations	tance: gistered agent and to accept service of tion, I hereby accept the appointment a tions of all statutes relative to the prope, of my position as registered agent. 3y: CT Corporation System (Regularization)	process for the above stated limite as registered agent and agree to ac r and complete performance of my Jennifer Cuinn Signature	d liability company at the place t in this cupacity. I further agree duties, and I am familiar with
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Typed or printed name of signer

File Number

0548248-8



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

TETHYS GROUP LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON OCTOBER 29, 2015, 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 26TH day of SEPTEMBER A.D.

Authentication #: 1726903606 verifiable until 09/26/2018 Authenticate at, http://www.cyberdriveillinors.com