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то:	Registration Section Division of Corporati	ons					
SUBJE	TANGERINE ES	SENCE LLC					
0000		Name of	Limited Liability (Company			
		oreign Limited Liability Comp ted to register the above refer					
Please	return all correspondence	concerning this matter to the	following:				
	Jing Liu						
		N	ame of Person				
	One Step Pro	One Step Professional Services LLC					
		F	irm/Company				
	2146B S Arc	2146B S Archer Ave					
	Address						
	Chicago, IL 6	Chicago, IL 60616					
		City/S	State and Zip Code				
	annaliu,mariac	pa@gmail.com					
		E-mail address: (to be use	d for future annual	report not	ification)		
For fur	ther information concern	ing this matter, please call:					
	Anna Liu		312 at (631-32	16		
	Name	of Contact Person	Area Code	Day	time Telephone Number		
	MAILING ADDRESS Division of Corporatio Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrat Clifton B 2661 Exe	of Corporations ion Section uilding centive Center Circle see, FL 32301		
Enclose	ed is a check for the follo S125.00 Filing Fee	wing amount: S130.00 Filing Fee & Certificate of Status	□ \$155.00 Filin Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Co of Status & Certified Cop		

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

TANGERINE ESSENC	CE LLC			
(Name of Fore	ign Limited Liability Company; n	nust include "Limited Lia	ability Company," "L.L.C.," o	r "LLC.")
If name unavailable, enter al Liability Company," "L.L.C.	ternate name adopted for the purp	ose of transacting busine	ss in Florida. The alternate na	ume must include "Limited
2. Illinois		38-4020169		
(Jurisdiction under the law company is organized)	of which foreign limited liability	J	(FEI number, if applicabl	e)
1. Upon Qualification				
	(Date first transacted busi (See sections 605.0904 & 60	iness in Florida, if prior to 05.0905, F.S. to determin	o registration.) se penalty liability)	_
332 S MICHIGAN AV				_
CHICAGO, IL 60604				
	(Street Address o	of Principal Office)		_
6. SAME			· - · · · · · · · · · · · · · · · · · ·	
, <u> </u>	(Mailin	ig Address)		_
7. Name and street addres	s of Florida registered agent: ((P.O. Box <u>NOT</u> accep	table)	
Name:	Registered Agents Inc.		_	~~ .
Office Address:	3030 N. Rocky Point Dr. STI	E 150A	- -	7 QC 7
	Tampa		_ , Florida <u>33607</u>	****
	(City)	· · · · · · · · · · · · · · · · · · ·	(Zip code)	— 47 ₁
Registered agent's accep	tance: gistered agent and to accept so			
lesignated in this applica	gistered agent and to accept so tion, I hereby accept the appoi ons of all statutes relative to th	intment as registered a	igent and agree to act in t	his capacity. T further agree
accept the obligations of r	my position as registered agen	ic proper una compien i	e perjormance of my auni	is, una i amzanatai with ar
	Bellone	Bill HavreAs:	st. Secretary	
	(Rcg	istered agent's signature))	_
8. The name, title or capa	scity and address of the person((s) who has/have autho	rity to manage is/are:	
JIAN LIU MEMBER				
2146B S ARCHER AVE				
CHICAGO, IL 60616-151	14			
Attached is a certificate urisdiction under the law of the translator must be st	of existence, no more than 90 of which it is organized. (If the abmitted)	days old, duly authenti e certificate is in a forei	cated by the official having ign language, a translation	g custody of records in the of the certificate under oath
	Signatu	are of an authorized perso	on	_
This document is executed ubmitted in a document to	in accordance with section 603 the Department of State const	5.0203 (1) (b), Florida itutes a third degree fel	Statutes. I am aware that a	ny false information 7.155. F.S.
	JIAN LIU	- 6	, ,	1/

Typed or printed name of signee



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

TANGERINE ESSENCE LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON NOVEMBER 17, 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 5TH day of OCTOBER A.D. 2017.

Authentication #: 1727801808 verifiable until 10/05/2018
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE