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JAN 2 3 201.9. J. HARRIS

COVER LETTER

		CV CEBVICE LLC					
SUBJECT: _	SINUAME ENERG	GY SERVICE LLC					
		Name of I	Limited Liability C	ompany			
					nsact Business in Florida," Certific company to transact business in Fl		
Please return :	II correspondence	concerning this matter to the	following:				
	Jing Liu						
	Name of Person						
	One Step Professional Services LLC						
	Firm/Company						
	2146B S Archer Ave						
	Address						
	Chicago, IL 60616						
		City/S	tate and Zip Code				
	annaliu.mariaep	a@gmail.com					
		E-mail address: (to be used	I for future annual	report not	ification)		
For further in	ormation concernit	ng 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 Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301					
	check for the follow 25.00 Filing Fee	ving amount: ☐ \$130.00 Filing Fee & Certificate of Status	S155.00 Filin	ıg Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy		

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

IN COMPLIANCE WITH SECTION 03,002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

SINOAME ENERGY S			
(Name of Fore	ign Limited Liability Company; must inc	lude "Limited Liability Company," "L.L.C.," or	LLC.")
If name unavailable, enter ability Company," "L.L.C."		ransacting business in Florida. The alternate nam	e must include "Limited
Illinois	3	3. 36-4886628	
(Jurisdiction under the law company is organized)			
Upon Qualification	//> // // // // // // // // // // // //	West for Production and Control of the Control of t	
1100 SHERMAN AVE		Florida, if prior to registration.) (i. F.S. to determine penalty liability)	
NAPERVILLE, IL 605	201		
	(Street Address of Princi	ipal Office)	
SAME	F2 11		
	(Mailing Äddre	ess)	· 12
Manager 1	•		
. Name and <u>street addres</u>	s of Florida registered agent: (P.O. B		
Name:	Registered Agents Inc.	. ω	
Office Address:	3030 N. Rocky Point Dr. STE 150A		
	Tampa	, Florida <u>33607</u>	_
legistered agent's accep	(City)	(Zip code)	
lesignated in this application complywith the provision	ion, I hereby accept the appointment ons of all statutes relative to the proping position as registered agent.	of process for the above stated limited liabil at as registered agent and agree to act in this oer and complete performance of my duties Bill HavreAsst. Secretary	s capacity. I further ag
8. The name, title or capa	·	o has/have authority to manage is/are:	
2146B S ARCHER AVE			
CHICAGO, IL 60616-15	4		
	of which it is organized. (If the certifi	ld, duly authenticated by the official having icate is in a foreign language, a translation of Wan	
		n authorized person	•
ri	-	·	in the state of
		(1) (b), Florida Statutes, I am aware that any a third degree felony as provided for in s.817	

Typed or printed name of signee

NAN WANG

File Number

0667009-1



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

SINOAME ENERGY SERVICE LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 28, 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 16TH day of JANUARY A.D. 2018.

Authentication #: 1801602668 verifiable until 01/16/2019
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE