M18000001563

(D		
(Red	questor's Name)	
(Add	iress)	
(Add	lress)	
(City	//State/Zip/Phone	<u>. #)</u>
(01.)	/Ototo/E/p// Horro	,
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
·	•	•
	cument Number)	
(LOC	zument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F		

Office Use Only



000309006820

02/13/18--01013--028 **125.00

FEB 1 4 2018

COVER LETTER

TO:

	Division of Corporations
JBJI	The Starfish Villa LLC ECT:
	Name of Limited Liability Company
	nclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certi- nce, and check are submitted to register the above referenced foreign limited liability company to transact business in
case	return all correspondence concerning this matter to the following:
	Marzenna Chmielecki
	Name of Person
	Firm/Company
	771 Mather Ln.
	Address
	Batavia, IL 60510
	City/State and Zip Code
	m_chmielecki@yahoo.com
	E-mail address: (to be used for future annual report notification)
r fur	rther information concerning this matter, please call:
	Marzenna Chmielecki 630 779-5456
	Name of Contact Person Area Code Daytime Telephone Number
	MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
clos	ied is a check for the following amount: \$\B \\$125.00 \text{ Filing Fee} \Begin{array} \pi 130.00 \text{ Filing Fee & } \Begin{array} \Pi 155.00 \text{ Filing Fee & } \Begin{array} \Pi 160.00 \text{ Filing Fee, Certificate of Status} \text{Certified Copy} \text{of Status & Certified Copy} \end{array}

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 BUSINESS IN THE STATE OF FLORIDA:

	name adopted for the purpose of transacting business in E	Florida. The afternate name must include "Limited Lie	ability Company," "L.L.C." or "LLC.")
2. Illinois		3. 82-3045497	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(FEI num	ber, if applicable)
4. 11/1/2017			
	(Date first transacted business in Florida, if prior (See sections 605.0904 & 605.0905, F.S. to deter	to registration.) mine penalty liability)	
5 2394 Pappas Ter.		6. 771 Mather Ln.	
(Street Address of	•	(Mailing Add	iress)
Port Charlotte, FL 339	181	Batavia, IL 60510	<u> </u>
			B 1
Name and street addre	ss of Florida registered agent: (P.O. Bo	ox NOT acceptable)	
Name:	Marzenna Chmielecki		9 (-)
	2304 Bannag Tor		; · · · · · · · · · · · · · · · · · · ·
Office Address:	2394 Pappas Ter.		9 T 19
	Port Charlotte,	, Florida 33981	**
Having been named as ro designated in this applica to comply with the provis	otance: egistered agent and to accept service of ation, I hereby accept the appointment ions of all statutes relative to the property of my position as registered agent.	as registered agent and agree to acc	in this capacity. I further ag
designated in this applicate to comply with the provis	otance: egistered agent and to accept service of stion, I hereby accept the appointment ions of all statutes relative to the prope	as registered agent and agree to accert and complete performance of my	in this capacity. I further ag
Having been named as red designated in this applica- to comply with the provis- and accept the obligation 8. The name, title or cap	otance: egistered agent and to accept service of ation. I hereby accept the appointment ions of all statutes relative to the property of my position as registered agent. (Registered agent accity and address of the person(s) who	as registered agent and agree to accer and complete performance of my signature) has/have authority to manage is/are:	in this capacity. I further ag
Having been named as red designated in this applica- to comply with the provis and accept the obligation	otance: egistered agent and to accept service of ation, I hereby accept the appointment ions of all statutes relative to the property of my position as registered agent. (Registered agent	as registered agent and agree to acter and complete performance of my was signature)	in this capacity. I further ag
Having been named as red designated in this applica- to comply with the provis- and accept the obligation 8. The name, title or cap	otance: egistered agent and to accept service of attion, I hereby accept the appointment ions of all statutes relative to the property of my position as registered agent. (Registered agent acity and address of the person(s) who Name and Address: Marzenna Chmiclecki	as registered agent and agree to accer and complete performance of my signature) has/have authority to manage is/are:	t in this capacity. I further ag duties, and I am familiar with
Having been named as redesignated in this applicate to comply with the provisuand accept the obligation 8. The name, title or cap <u>Title or Capacity:</u>	otance: egistered agent and to accept service of atton. I hereby accept the appointment ions of all statutes relative to the property of my position as registered agent. (Registered agent acity and address of the person(s) who Name and Address: Marzenna Chmiclecki 771 Mather Ln.	as registered agent and agree to accer and complete performance of my signature) has/have authority to manage is/are:	t in this capacity. I further ag duties, and I am familiar with
Having been named as redesignated in this applicate to comply with the provisuand accept the obligation 8. The name, title or cap <u>Title or Capacity:</u>	otance: egistered agent and to accept service of attion, I hereby accept the appointment ions of all statutes relative to the property of my position as registered agent. (Registered agent acity and address of the person(s) who Name and Address: Marzenna Chmiclecki	as registered agent and agree to accer and complete performance of my signature) has/have authority to manage is/are:	t in this capacity. I further ag duties, and I am familiar with
Having been named as redesignated in this applicate to comply with the provisuand accept the obligation 8. The name, title or cap <u>Title or Capacity:</u>	otance: egistered agent and to accept service of atton. I hereby accept the appointment ions of all statutes relative to the property of my position as registered agent. (Registered agent acity and address of the person(s) who Name and Address: Marzenna Chmiclecki 771 Mather Ln.	as registered agent and agree to accer and complete performance of my signature) has/have authority to manage is/are:	t in this capacity. I further ag duties, and I am familiar with
Having been named as redesignated in this applicate to comply with the provisuand accept the obligation 8. The name, title or cap <u>Title or Capacity:</u>	otance: egistered agent and to accept service of atton. I hereby accept the appointment ions of all statutes relative to the property of my position as registered agent. (Registered agent acity and address of the person(s) who Name and Address: Marzenna Chmiclecki 771 Mather Ln.	as registered agent and agree to accer and complete performance of my signature) has/have authority to manage is/are:	t in this capacity. I further ag duties, and I am familiar with
Having been named as redesignated in this applicate to comply with the provisuand accept the obligation 8. The name, title or cap Title or Capacity: Owner	otance: egistered agent and to accept service of attion. I hereby accept the appointment ions of all statutes relative to the property of my position as registered agent. (Registered agent active and address of the person(s) who Name and Address: Marzenna Chmiclecki 771 Mather Ln. Batavia, IL 60510	as registered agent and agree to accer and complete performance of my signature) has/have authority to manage is/are:	t in this capacity. I further ag duties, and I am familiar with
Having been named as redesignated in this applicate to comply with the provisuand accept the obligation 8. The name, title or cap <u>Title or Capacity:</u>	otance: egistered agent and to accept service of atton. I hereby accept the appointment ions of all statutes relative to the property of my position as registered agent. (Registered agent acity and address of the person(s) who Name and Address: Marzenna Chmiclecki 771 Mather Ln.	as registered agent and agree to accer and complete performance of my signature) has/have authority to manage is/are:	t in this capacity. I further a duties, and I am familiar wi
Having been named as redesignated in this applicate to comply with the provisuand accept the obligation 8. The name, title or cap Title or Capacity: Owner (Use attachments if neces)	otance: egistered agent and to accept service of attion. I hereby accept the appointment ions of all statutes relative to the property of my position as registered agent. (Registered agent accity and address of the person(s) who hame and Address: Marzenna Chmiclecki 771 Mather Ln. Batavia. IL 60510	as registered agent and agree to accer and complete performance of my signature) has/have authority to manage is/are: Title or Capacity:	n in this capacity. I further ag duties, and I am familiar with Mame and Address: Name and Address:
Having been named as redesignated in this applicate to comply with the provisuand accept the obligation 8. The name, title or cap Title or Capacity: Owner (Use attachments if neces)	otance: egistered agent and to accept service of attion, I hereby accept the appointment ions of all statutes relative to the property of my position as registered agent. (Registered agent active and address of the person(s) who Name and Address: Marzenna Chmiclecki 771 Mather Ln. Batavia, IL 60510 ssary) e of existence, no more than 90 days old of which it is organized. (If the certification is said and accept service of a s	as registered agent and agree to accer and complete performance of my signature) has/have authority to manage is/are: Title or Capacity:	n in this capacity. I further ag duties, and I am familiar with Mame and Address: Name and Address:

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

THE STARFISH VILLA LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON OCTOBER 06, 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 9TH day of FEBRUARY A.D. 2018.

Authentication #: 1804001370 verifiable until 02/09/2019
Authenticate at: http://www.cyberdriveillinois.com

Sesse White

SECRETARY OF STATE



File Number

06535771

Entity Name

THE STARFISH VILLA LLC

Status

ACTIVE

On

10/06/2017

Entity Type

LLC

Type of LLC

Domestic

File Date

10/06/2017

Jurisdiction

IL

Agent Name

DANIEL STEFANCZUK

Agent Change Date

10/06/2017

Agent Street Address

6841 W BELMONT AVE

Principal Office

771 MATHER LN

BATAVIA, IL 605100000

Agent City

CHICAGO

Managers

Agent Zip

60634

Duration

PERPETUAL

Annual Report Filing

Date

00/00/0000

For Year

Series Name

NOT AUTHORIZED TO ESTABLISH SERIES

Purchase Certificate of Good Standing (One Certificate per Transaction)

OTHER SERVICES

File Annual Report 1

Adopting Assumed Name |

Articles of Amendment Effecting A Name Change |

Change of Registered Agent and/or Registered Office Address

and the second s