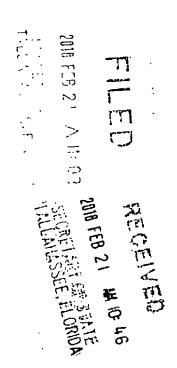
MBOOOBIO

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Soomess Emily Hame)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900309429339



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 078052 4359881
AUTHORIZATION ANGELOR
COST LIMIT : \$ 125.00
ORDER DATE : February 20, 2018
ORDER TIME: 10:12 AM
ORDER NO. : 078052-005
CUSTOMER NO: 4359881
FOREIGN FILINGS
NAME: JAME ROLL FORM PRODUCTS, LLC
XXXX QUALIFICATION (TYPE: <u>LL</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Roxanne Turner EXT# 62969

EXAMINER:

COVER LETTER

TO:

TO:	Registration Section Division of Corporations				
	JAME ROLL FORM PE	RODUCTS, LLC			
SUBJI	CCT:Name of L	imited Liability C	Company	-	
The en Exister	closed "Application by Foreign Limited Liability Compa	any for Authorizationed foreign limit	tion to Transact Business in Florida, ed liability company to transact busi	" Certificat ness in Flo	te of orida.
Please	return all correspondence concerning this matter to the fo	ollowing:			
	Ronna Zac	:k			
	Nau	me of Person		-	
Patzik, Frank & Samotny Ltd.					
	Firm/Company				
150 S. Wacker Drive, Suite 1500					
	Address Chicago, 11. 60606				
	City/Sta	ate and Zip Code		-	
	rzack@pfs-law	.com	1		
	E-mail address: (to be used	for future annual	report notification)	2010	er. 1
For fu	ther information concerning this matter, please call:		· ·	- E	1 }
	Ronna Zack	312 at (551-3054		TIT!
	Name of Contact Person	Area Code	Daytime 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	() () () () () () () () () ()	<i></i>
Enclos	sed is a check for the following amount: ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filit Certified Copy			

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

IN COMPLIANCE WITH SPCTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: JAME ROLL FORM PRODUCTS, LLC (Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC,") 3. 36-3225298 (Jurisdiction under the law of which foreign limited liability company is organized) (FE number if applicable) (Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605 0905, F.S. to determine penalty liability.) 6. 2401 North 25th Avenue 2401 North 25th Avenue (Street Address of Principal Office) (Mailing Address) Franklin Park, IL 60131 Franklin Park, IL 60131 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Corporation Service Company Name: 1201 Hays Street Office Address: Tallahassee , Florida 32301 Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with Roxanne Türner and accept the obligations of my position as registered agent Asst. Vice President 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Title or Capacity: Title or Capacity: Name and Address: Name and Address: Mars Industries, LLC Manager 2401 North 25th Avenue Franklin Park, IL 60131 Authorized person Sheffield Wolk 2401 North 25th Avenue Franklin Park, IL 60131 (Use attachments if necessary) 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Ronna Zack

Typed or printed name of signee

Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "JAME ROLL FORM PRODUCTS, LLC" IS DULY

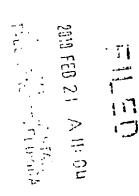
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTIETH DAY OF FEBRUARY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "JAME ROLL FORM PRODUCTS, LLC" WAS FORMED ON THE SIXTH DAY OF DECEMBER, A.D. 2017.

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





Authentication: 202179461

Date: 02-20-18

6649819 8300 SR# 20181150193