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Florida Department of State

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Foreign Limited Liability Company Merrick Venture Management, LLC

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

IN COMPLIANCE WITH SECTION 635-0902, FLORIDA STATISTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1. Merrick Venture Managment, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "Li. C.," or "Li.C.") (If name unavailable, enter alternate name adopted for the purpose of mensacring business in Florida. The alternate name must include "Limited Liability Company," "LLC." or "LLC." 3. 20-5938356 (PEI number, if applicable) (Junsdiction under the law of which foreign triuted liability company is organized) (Date first transacted business in Monda, if prior to registration)
(See sections 605,0904 & 605,0903, F.S. to determine penalty hability) 6. 875 N. MICHIGAN AVE. 5. 875 N MICHIGAN AVE. (Mailing Address) (Street Address of Principal Office) **SUITE 3230 SUITE 3230** CHICAGO, IL 60611 CHICAGO, IL 60611 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: , Fienda ³³³²⁴ Plantation (City) 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 und accept the obligations of my position as registered agent. C T Corporation System-Danny Verdecchia (Regimered agent's stansture) Assistant Secretary 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Name and Address: Title or Capacity: Name and Address: Title or Capacity: EDWARD LANDON **CFO** 875 N. MICHIGAN AVE HICAGO, IL 60611 (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 outh 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. Signature of an authorized person Edward W Landon

Typed or printed misse of signed

File Number

0203382-8



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

MERRICK VENTURE MANAGEMENT, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON NOVEMBER 22, 2006, 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 AUGUST A.D. 2018 .

Authentication #: 1822102956 verifiable until 08/09/2019
Authenticate at, http://www.cyberdriveillinois.com

SECRETARY OF STATE