M18000008044

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

Office Use Only



900317443879

08/27/18--01018--028 **125.00



N CULLIGAN SEP 4 2018

COVER LETTER

ţ.

| | gistration Section vision of Corporatio | ns | | | | | | | |
|--|---|---|------------------------------------|--|---|--|--|--|--|
| SUBJECT: | JINSHI CONSULT | ING LLC | | | | | | | |
| | | Name of | Limited Liability | Company | | | | | |
| | | | | | ansact Business in Florida," Certificate of y company to transact business in Florida | | | | |
| Please return | all correspondence | concerning this matter to the | following: | | | | | | |
| | Jing Liu | | | | | | | | |
| | | N | lame of Person | | | | | | |
| | One Step Profe | One Step Professional Services LLC | | | | | | | |
| | Firm/Company | | | | | | | | |
| | 2146B S Arch | 2146B S Archer Ave | | | | | | | |
| | Address | | | | | | | | |
| | Chicago, IL 60 | Chicago, 1L 60616 | | | | | | | |
| | City/State and Zip Code | | | | | | | | |
| | annaliu.mariacp | | | | | | | | |
| | | E-mail address: (to be use | d for future annua | l report no | tification) | | | | |
| For further i | nformation concernit | ng this matter, please call: | | | | | | | |
| Anna Liu | | | 312 at (| 631-32 | 16 | | | | |
| | Name | of Contact Person | Area Code | Day | rtime Telephone Number | | | | |
| MAILING ADDRESS: Division of Corporations Registration Section P.C. Box 6327 Tallahassee, FL 32314 | | STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | of Corporations ion Section suilding ecutive Center Circle | | | | | |
| | a check for the follow \$125.00 Filing Fee | ring amount: ☐ \$130.00 Filing Fee & Certificate of Status | □ \$155.00 Filir Certified Copy | ng Fee & | ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy | | | | |

☐ \$155.00 Filing Fee & Certified Copy

□ \$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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY .COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| I. JINSHI CONSULTING | G LLC | | | |
|---|--|---|---|--|
| (Name of Fore | eign Limited Liability Co | mpany; must include "Lim | ited Liability Company," "L.L.C.," (| or "LLC.") |
| (If name unavailable, enter al Liability Company," "L.L.C. | | the purpose of transacting | business in Florida. The alternate na | ame must include "Limited |
| 2. Illinois | | 3 61-18 | 99286 | |
| (Jurisdiction under the law company is organized) | le) | | | |
| 4. Upon Qualification | | | | _ |
| | (Date first transa (See sections 605.0 | cted business in Florida, if 904 & 605,0905, F.S. to d | (prior to registration.) letermine penalty liability) | |
| 5. 1100 SHERMAN AVI | E SUITE 114-A106 | | | <u> </u> |
| NAPERVILLE, IL 605 | 20 | | | |
| | (Street / | Address of Principal Office | :) | T AFEC TO THE TOTAL TOTA |
| 6. SAME | | | | _ AR US - |
| | | | | 27 27 28 |
| | | (Mailing Address) | ·· - · · · · · · · · · · · · · · · · · | |
| 7. Name and street address | ss of Florida registered | agent: (P.O. Box NOT | acceptable) | F 57 A 12: |
| Name: | Registered Agents In | | | FILED 2018 AUG 27 PH 12: 16 |
| Office Address: | 3030 N. Rocky Point | Dr. STE 150A | | |
| | Tampa | | , Florida _33607 | |
| Registered agent's accep | | (City) | (Zip code) | |
| designated in this applica | ition, I hereby accept to ions of all statutes rela | he appointment as registive to the proper and co ed agent. | s for the above stated limited lia stered agent and agree to act in to complete performance of my dution. The complete performance of my dution. | this capacity. I further agree |
| | | (Registered agent's sig | gnature) | |
| 8. The name, title or capa | acity and address of the | person(s) who has/have | e authority to manage is/are: | |
| DONG HE MEMBE | R PING SUN | MEMBER | | |
| 2146B S ARCHER AVE | 2146B S A | RCHER AVE | | |
| CHICAGO, IL 60616-15 | 14 CHICAGO | , IL 60616-1514 | | |
| | of which it is organized | | uthenticated by the official havin a foreign language, a translation | |
| | | Signature of an authorize | ed person | _ |
| This document is assessed | d in aggordance with any | _ | • | and full and in former of |
| | | | Florida Statutes. I am aware that a gree felony as provided for in s.81 | |

Typed or printed name of signee

DONG HE



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

JINSHI CONSULTING LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON AUGUST 20, 2018, 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 23RD

day of AUGUST A.D. 2018

Authentication #: 1823502318 verifiable until 08/23/2019

Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE