M18000008757

(Requestor's Name)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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N. CAUSSEAUX SEP 2 4 2318

COVER LETTER

	egistration Section vision of Corporation	s					
SUBJECT	TN Chicago, L.C.						
SOBJECT	Name of Limited Liability Company						
The enclose Existence,	ed "Application by For and check are submitted	cign Limited Liability Comp I to register the above refere	any for Authorizat need foreign limite	ion to Tra d liability	nsact Business in Florida," Certificate company to transact business in Flori	of da.	
Please retu	nı all correspondence c	oncerning this matter to the	following:				
	Randall Rings						
		Na	me of Person				
	TN Chicago, L.	C.					
		Fir	m/Company				
	500 1st Street S	E					
			Address				
	Cedar Rapids, I	A 52401					
		City/St	ate and Zip Code				
	rring@truenorthe	•					
		E-mail address: (to be used	for future annual	report not	ification)		
For further	information concerning	g this matter, please call:					
ĸ	andall Rings		319 _ at (739-138 			
	Name o	f Contact Person	Area Code	Day	time Telephone Number		
D R P.	IAILING ADDRESS: ivision of Corporations egistration Section O. Box 6327 allahassee, FL 32314			Division Registrati Clifton B 2661 Exc	ADDRESS: of Corporations on Section uilding cutive Center Circle ec, FL 32301		
	s a check for the follow I \$125.00 Filing Fee	ing amount: \$\Bigsim \frac{\partial}{2} \frac{\partial}{2} \frac{\partial}{2} \text{Certificate of Status}	☐ \$155.00 Filin Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy		



September 6, 2018

RANDALL RINGS TN CHICAGO, L.C. 500 1ST STREET SE CEDATR RAPIDS, IA 52401

SUBJECT: TN CHICAGO, L.C. Ref. Number: W18000080128

We have received your document for TN CHICAGO, L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The original name cannot be altered, you must merely add "LLC" to the existing name. EXAMPLE: TN CHICAGO, L.C. LLC

The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." Please add the appropriate designation to the name of your limited liability company or to the alternate name you have selected for the state of Florida, if your name is unavailable in this state. The following suffixes are no longer acceptable limited liability company suffixes in Florida: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Nanette Causseaux Regulatory Specialist II Supervisor

www.sunbiz.org

DO DOM GOOD BY HILL TILL IN

Letter Number: 918A00018475

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:

(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Flo	rida. The alternate name must include "Limited	Liability Company," "L.L.C," or "LI.C.")
2. Iowa		3. 47-5602669	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	J. (FEI)	number, if applicable)
4.			
···	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determ	registration.) ine penalty liability)	
5 500 1st Street SE		6. 500 1st Street SE	
(Street Address of I	•	(Mailing	
Cedar Rapids, IA 5240) 	Cedar Rapids, IA 52401	151 mg
			47.
7. Numa und atraut addra	ss of Florida registered agent: (P.O. Box	NOT acceptable)	20 PH
7. Name and <u>street addres</u>	ss of Florida registered agent. (F.O. Dox	MOT acceptable)	P (*
Name:	Corporation Service Company		PH 1:42
Office Address:	1201 Hays Street		7.
Office Address:			7.3
	Tallahassee	, Florida 32301 (Zip	
Registered agent's accep	(City)	(Zi _F	code)
	Corporation Service Company	inolly Joize	<u> </u>
	Corporation Service Company By: G.		
•	acity and address of the person(s) who ha	signature) as/have authority to manage is/ar	e:
Title or Capacity:	acity and address of the person(s) who have and Address:	signature) as/have authority to manage is/ar <u>Title or Capacity:</u>	e: <u>Name and Address:</u>
•	acity and address of the person(s) who have and Address: Duane J. Smith	signature) as/have authority to manage is/ar	e: <u>Name and Address:</u> J. Maxwell Smith
Title or Capacity:	acity and address of the person(s) who have and Address:	signature) as/have authority to manage is/ar <u>Title or Capacity:</u>	e: <u>Name and Address:</u>
Title or Capacity: Manager	Duane J. Smith 500 1st Street SE Cedar Rapids, IA 52401	signature) as/have authority to manage is/ar Title or Capacity: Manager	e: Name and Address: J. Maxwell Smith 500 1st Street SE
Title or Capacity:	Duane J. Smith 500 1st Street SE Cedar Rapids, IA 52401 Randall Rings 500 1st Street SE	signature) as/have authority to manage is/ar <u>Title or Capacity:</u>	e: Name and Address: J. Maxwell Smith 500 1st Street SE Cedar Rapids, 1A 52401 T. Gerald Magner, III 500 1st Street SE
Title or Capacity: Manager	Duane J. Smith 500 1st Street SE Cedar Rapids, IA 52401 Randall Rings	signature) as/have authority to manage is/ar Title or Capacity: Manager	e: Name and Address: J. Maxwell Smith 500 1st Street SE Cedar Rapids, IA 52401 T. Gerald Magner, III
Title or Capacity: Manager	Duanc J. Smith 500 1st Street SE Cedar Rapids, IA 52401 Randall Rings 500 1st Street SE Cedar Rapids, IA 52401	signature) as/have authority to manage is/ar Title or Capacity: Manager	e: Name and Address: J. Maxwell Smith 500 1st Street SE Cedar Rapids, 1A 52401 T. Gerald Magner, III 500 1st Street SE
Manager Manager (Use attachments if necessity: a certificate jurisdiction under the law of the translator must be second to the tr	Duanc J. Smith 500 1st Street SE Cedar Rapids, IA 52401 Randall Rings 500 1st Street SE Cedar Rapids, IA 52401 ssary) c of existence, no more than 90 days old, of which it is organized. (If the certifica	as/have authority to manage is/ar Title or Capacity: Manager Manager duly authenticated by the official te is in a foreign language, a tran	e: Name and Address: J. Maxwell Smith 500 1st Street SE Cedar Rapids, IA 52401 T. Gerald Magner, III 500 1st Street SE Cedar Rapids, IA 52401 I having custody of records in the slation of the certificate under oath ware that any false information
Manager Manager (Use attachments if necessity: a certificate jurisdiction under the law of the translator must be submitted in a document to execute the submitted in a document to the	Duane J. Smith 500 1st Street SE Cedar Rapids, IA 52401 Randall Rings 500 1st Street SE Cedar Rapids, IA 52401 Randall Rings 500 1st Street SE Cedar Rapids, IA 52401 ssary) c of existence, no more than 90 days old, of which it is organized. (If the certifical submitted) cuted in accordance with section 605.020 to the Department of State constitutes a the section of the sec	as/have authority to manage is/ar Title or Capacity: Manager Manager duly authenticated by the officiate is in a foreign language, a transit of the degree felony as provided for	e: Name and Address: J. Maxwell Smith 500 1st Street SE Cedar Rapids, IA 52401 T. Gerald Magner, III 500 1st Street SE Cedar Rapids, IA 52401 I having custody of records in the slation of the certificate under oath ware that any false information
Manager Manager (Use attachments if necessity: a certificate jurisdiction under the law of the translator must be submitted in a document to execute the submitted in a document to the	Duane J. Smith 500 1st Street SE Cedar Rapids, IA 52401 Randall Rings 500 1st Street SE Cedar Rapids, IA 52401 Randall Rings 500 1st Street SE Cedar Rapids, IA 52401 ssary) c of existence, no more than 90 days old, of which it is organized. (If the certifical submitted) cuted in accordance with section 605.020 to the Department of State constitutes a the section of the sec	as/have authority to manage is/ar Title or Capacity: Manager Manager duly authenticated by the official te is in a foreign language, a tran	e: Name and Address: J. Maxwell Smith 500 1st Street SE Cedar Rapids, IA 52401 T. Gerald Magner, III 500 1st Street SE Cedar Rapids, IA 52401 I having custody of records in the slation of the certificate under oath ware that any false information

IOWA SECRETARY OF STATE PAUL D. PATE



CERTIFICATE OF EXISTENCE

Date: 8/24/2018

Name: TN CHICAGO, L.C. (489DLC - 511344)

Date of Incorporation: 11/16/2015

Duration: PERPETUAL



- I, Paul D. Pate, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the limited liability company named on this certificate:
 - a. The entity is in existence and duly incorporated under the laws of lowa.
 - b. All fees, taxes and penalties required under the Revised Uniform Limited Liability Company Act and other laws due the Secretary of State have been paid.
 - c. The most recent biennial report required has been filed with the Secretary of State.
 - d. The Secretary of State has not administratively dissolved the limited liability company.
 - e. The Secretary of State has not filed either a statement of dissolution or statement of termination.

Certificate ID: CS155827

To validate certificates visit:

sos.iowa.gov/ValidateCertificate

Paul D. Pate, Iowa Secretary of State