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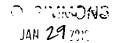
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	COLLIER & 20TH LLC (CORPORATE NAME AND DOCUME	ENT #)
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ECIA	L INSTRUCTIONS:	

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

IN COMPLIANCE WITH SECTION 605 (902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

·	one adopted for the purpose of transacting business in Flor	ish. The observate earne coust include "Lumited Li	ability Company," "L L C," or "LLC ")
linois		₂ 83-2749505	•
(Jurisdiction under the law of wh	ack foreign lumited liability company is organized)	J.	rber, of applicable)
	(See sections 605,0904 & 605,0905, F.S. to determine	registration)	
71 S. WACKER DRIV		6. 71 S. WACKER DRIVE	SUITE 2760
(Street Address of Principal Office)		(Klading Address)	
CHICAGO, IL 60606		CHICAGO, IL 60606	
Name and street address	s of Florida registered agent: (P.O. Box	NOT accomple)	- <u>.</u>
Ivanie mie <u>arteer naures</u>		1401 acceptable)	
Name:	Registered Agent Solutions, Inc.		第28
Office Address:	155 Office Plaza Dr. Suite A		10 to
	Tallahassee	, Florida <u>32301</u>	6 C
	(Cu ₂)	1Zip ci	xk) = ==================================
	(Registered agent's	•	
	ocity and address of the person(s) who ha	s/have authority to manage is/are:	
Title or Capacity:	ecity and address of the person(s) who hat Name and Address:	as/have authority to manage is/are: Title or Capacity:	Name and Address:
	Decity and address of the person(s) who has Name and Address: Steven M. Swanson II	s/have authority to manage is/are:	Name and Address: Joseph P. Flaniga
Title or Capacity:	ecity and address of the person(s) who hat Name and Address:	as/have authority to manage is/are: Title or Capacity:	Name and Address:
Title or Capacity:	Decity and address of the person(s) who has Name and Address: Steven M. Swanson II	as/have authority to manage is/are: Title or Capacity:	Name and Address: Joseph P. Flaniga
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Title or Capacity:	Decity and address of the person(s) who has Name and Address: Steven M. Swanson II	as/have authority to manage is/are: Title or Capacity:	Name and Address: Joseph P. Flaniga
Title or Capacity: Mgr.	Steven M. Swanson II 71.5 Waster Dr. Ste 2780 Change is 80808	as/have authority to manage is/are: Title or Capacity:	Name and Address: Joseph P. Flaniga
Title or Capacity; Mgr. Jse attachments if neces Attached is a certificate risdiction under the law	Steven M. Swanson II 715 Waster Dt. Steve 7780 Cheago it 80008 sary) of existence, no more than 90 days old, of which it is organized. (If the certificat	as/have authority to manage is/are: Title or Capacity: Mgr. duly authenticated by the official	Name and Address: Joseph P. Flaniga 71.5 Waster Dr. Ste. 2790 Cricago, it. 60608
Title or Capacity: Mgr. Use attachments if necess Attached is a certificate risdiction under the law the translator must be seen. This document is executed.	Steven M. Swanson II 71.5 Water Dr. \$10. 2780 Cheege k 50008 sary) of existence, no more than 90 days old, of which it is organized. (If the certificate abmitted)	as/have authority to manage is/are: Title or Capacity; Mgr. duly authenticated by the official te is in a foreign language, a transl	Name and Address: Joseph P. Flaniga 71.5 Weeter Or Ste 2750 Cricago, it 60606 having custody of records in the ation of the certificate under or are that any false information
Mgr. Use attachments if neces Attached is a certificate risdiction under the law the translator must be so. This document is executed.	Steven M. Swanson II 71.5 Water Dr. \$40. 2780 Cheege k 80008 sary) of existence, no more than 90 days old, of which it is organized. (If the certificate about the department of state constitutes a terminal of the department of the departme	duly authenticated by the official is in a foreign language, a transl	Name and Address: Joseph P. Flaniga 71.5 Weeter Or Ste 2750 Cricago, it 60606 having custody of records in the ation of the certificate under or are that any false information
Title or Capacity: Mgr. Use attachments if necess Attached is a certificate risdiction under the law the translator must be seen. This document is executed.	Steven M. Swanson II 71.5 Water Dr. \$40. 2780 Cheege k 80008 sary) of existence, no more than 90 days old, of which it is organized. (If the certificate about the department of state constitutes a terminal of the department of the departme	as/have authority to manage is/are: Title or Capacity; Mgr. duly authenticated by the official te is in a foreign language, a transl	Name and Address: Joseph P. Flaniga 71.5 Weeter Or Ste 2750 Cricago, it 60606 having custody of records in the ation of the certificate under or are that any false information
Title or Capacity: Mgr. Use attachments if neces Attached is a certificate urisdiction under the law the translator must be se	Steven M. Swanson II 71.5 Water Dr. \$40. 2780 Cheege k 80008 sary) of existence, no more than 90 days old, of which it is organized. (If the certificate about the department of state constitutes a terminal of the department of the departme	duly authenticated by the official is in a foreign language, a transl	Name and Address: Joseph P. Flaniga 71.5 Weeter Or Ste 2750 Cricago, it 60606 having custody of records in the ation of the certificate under or are that any false information

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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

COLLIER & 20TH LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON DECEMBER 06, 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 25TH day of JANUARY A.D. 2019 .

Authentication #: 1902501686 verifiable until 01/25/2020 Authenticate at: http://www.cyberdriveillinois.com Desse White

SECRETARY OF STATE