## M2100000 1082

(Re	equestor's Name)	
(Ad	ldress)	· · · · · · · · · · · · · · · · · · ·
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	





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JAN 26 707' K. Brumbley



115 N; CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839

COGENCYGLOBAL.COM

MIT NHASSEFT TONE

Account#: 120000000088

Date:	01/26/2021	
	Jennifer Bialowas	_
Reference #	#:1317779	_
Entity Name	central STA	TES TOWER V, LLC
✓ Articl	les of Incorporation/Authorization	to Transact Business
Ame	ndment	
☐ Char	nge of Agent	Dlease obtain ori
Reins	statement	Dlease obtain ori Submission do 1/25/2021
Conv	version	1/25/2021
☐ Merg	er	
☐ Disso	olution/Withdrawal	
☐ Fictiti	ious Name	
Other	r	
Authorized A	Amount: 125.00	
Signature: _	Ju N	
	()	

F: 800.944.6607

P: +852.2682.9633

## COVER LETTER

TO:		tion Section of Corporations							
SHRI	ECT:		Central State	es T	ower V	′, Li	LC		
(,)()133		· · · · · ·	Name of I	imited	i Liability (	Comp	any		
The er Existe	nclosed "Ap	plication by Foreign eck are submitted to r	Limited Liability Compregister the above refere	any fo nced f	r Authorizz oreign limi	ntion t ted li	to Transac ability con	t Business in Florida," npany to transact busine	Certificate of ess in Florida
Please	return all c	orrespondence conce	rning this matter to the	follow	ing:				
			Wendy Fisher						
			Na	ime of	Person				
			Central States To	wer					
			Fi	m/Co	mpany	•			
			323 South Hale S	itreet,	Suite 100				
				Addı	ess				
			Wheaton, IL 601	87					
			City/St	ate an	d Zip Code				
	_		wendyf@central s						
		E-n	nail address: (to be used	for fu	ture annua	repo	ort notifical	tion)	
For fu	rther inform	ation concerning this	matter, please call:						
		Wendy Fishe	·r	at (_	630	)	221-8	500	
		Name of Cor	ntact Person		Area Code	_/	Daytime	Telephone Number	
	Division Registrat P.O. Box	of Corporations ion Section 6327 ee, FL 32314				Div Reg Clif 266	istration S Ion Buildi	orporations ection ng ve Center Circle	
	Please ma	is a check for the fol ake check payable to .00 Filing Fee	llowing amount: : FLORIDA DEPART S130.00 Filing Fee & Certificate of Stat		Г ОБ STA' □ \$155.00 Certifi	Filin	-	\$160.00 Filing For Status & Certi	· · · · · · · · · · · · · · · · · · ·

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

	Central State	s Tower	V, LLC	
(Name of Foreign	Limited Liability Company; must melude "I.	imited Liability	Company," "L.L.C.," o	r "LLC,")
: imavailable, enter alternale i	name adopted for the purpose of transacting business	in Florida, The alte	niate name must include "!	Limited Liability Company," "L.L. C," o
C	)elaware	3	85	-4102545
unsdiction under the law of w	hich foreign limited liability company is organized)	_		(FEI number, if applicable)
	1/1/202	1		
	(Date first transacted business in Florida, if pr (See sections 605,0904 & 605,0905, F.S. to d	nor to registration ) letermine penalty lia	bility)	, , , , , , , , , , , , , , , , , , ,
323 S Hale	e St., Ste 100	6	323 S Ha	ale St., Ste 10
(Sircet Address of	Principal Office)	o. <u>-</u>	(N	failing Address)
Wheator	n, IL 60187		Wheat	on, IL 60187
ime and <u>street addres</u> Name:	ss of Florida registered agent: (P.O.			1021 JAH 22
Name:		BALIN	C.	COLL JAN 22 AM 8:
Name:	COGENCY GLO	BAL IN St. Suite	C.	
Name: Office Address:	COGENCY GLOI  115 North Calhoun  Tallahasse	BAL IN St. Suite	C. <u>24</u>	
Name:  Office Address:  tered agent's accep  g been named as re  nated in this applica  uply with the provisi	COGENCY GLOI  115 North Calhoun  Tallahasse	BAL IN  St. Suite  ee  of process for as registers oper and com	C.  4  Florida  the above stated agent and agree	32301 & & & & & & & & & & & & & & & & & & &

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]: Name and Address: Title or Capacity: Name and Address: Title or Capacity: William Wade Brian Meier Name: \_ Manager |X | Manager Name: Address: 323 S Hale St., Ste 100 Address: 323 S Hale St., Ste 100 Member Member Wheaton, IL 60187 Wheaton, IL 60187 X Authorized Authorized Person Person Other\_\_\_\_\_ Other Other\_\_\_\_\_ Other\_ Name: \_\_\_\_\_\_ Manager Name: \_\_\_\_\_ Manager Member Address: \_\_\_\_\_ Member Address: \_\_\_\_\_\_ Authorized [ Authorized Person Person \_\_Other\_\_\_\_\_ Other\_ | Other\_\_\_\_\_ Other Manager |\_|Manager Name: \_\_\_\_\_\_ Member Address: \_\_\_\_\_\_ []Member Address: \_\_\_\_\_ Authorized Authorized Person Person Other\_\_\_\_ Other\_\_\_\_ Other \_\_\_\_ Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 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. Signature of an authorized person Brian Meier

Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "CENTRAL STATES TOWER V, 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 TWENTY-FIRST DAY OF JANUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CENTRAL STATES TOWER V, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF NOVEMBER, A.D. 2020.

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

And of the second secon

Authentication: 202337053

Date: 01-21-21

4218963 8300 SR# 20210181265