

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations Fax Number : (850)617-6383 From: Account Name : REGISTERED AGENTS INC. Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**	Division of Corporations Fax Number : (850)617-6383 From: Account Name : REGISTERED AGENTS INC. Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (855)330-1010 ter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address: Foreign Limited Liability Company ENVISIONIT CHICAGO, LLC	Division of Corporations Fax Number : (850)617-6383 From: Account Name : REGISTERED AGENTS INC. Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010 *Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Foreign Limited Liability Company						
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Help

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	iame adopted for the purpose of transacting business in Florid	ida. The alternate name must include "Limited Liability Company," "L. L.C," or "LLC.")
Illinois Gursdetion under the law of w	hich foreign limited liability company is organized)	3. 45-4042247 (FEI number, if applicable)
· · · · · · · · · · · · · · · · · · ·	(Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605 0905, F.S. to determine	rgistration.) to penalty liability)
5. 130 E. Ra	ndolph	6. 130 E. Randolph
Suite 1600		Suite 1600
Chicago IL	_ 60601	Chicago II 6060 2 2
7. Name and street addre	ss of Florida registered agent: {P.O. Box	NOT acceptable)
Name:	Registered Agents	s Inc.
Office Address:	7901 4th St N STE	∃ 300
	St. Petersburg	33702

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 and accept the obligations of my position as registered agent.

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: Name: TODD BROOK Name: _____ Manager Manager Manager Address: _____ Member | Address: _____ Member Chicago IL 60601 Authorized Authorized Person Person Other____ Other____ Other_ Other_____ Name: _____ Name: ______ Manager Address: _____ Address: Member Member Authorized Authorized Person Person Other Other_ Other____ Other_ Manager | Name: Name: Manager Member Address: ___ Address: _____ Member 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 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. Riley Park

Typed or printed name of signee

File Number

0378439-8



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

ENVISIONIT CHICAGO, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON NOVEMBER 16, 2011, 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 18TH day of FEBRUARY A.D. 2022.

Authentication #: 2204904252 verifiable until 02/18/2023

Authenticate at: http://www.ilsos.gov

Desse White

SECRETARY OF STATE