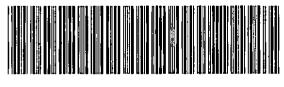
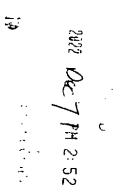
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| | (Requestor's Name) |
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| | , |
| | (Address) |
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| | (City/State/Zip/Phone #) |
| PICK-U | P WAIT MAIL |
| | (Business Entity Name) |
| | (Document Number) |
| Certified Copies | Certificates of Status |
| Special Instruction | s to Filing Officer: |
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T. LEMIEUX
DEC - 7 2022

COVER LETTER

| TO: : | Registration Section Division of Corpora | | |
|----------|---|--------------------------|--|
| SUBJE | CT: NBRE | LLC | |
| | | ì | Name of Limited Liability Company |
| | | | ility Company for Authorization to Transact Business in Florida," Certificate of sove referenced foreign limited hability company to transact business in Florida |
| Please r | etum all corresponder | ice concerning this mat | tter to the following: |
| | NAC | HMAN BE | RGER Name of Person |
| | | | Name of Person |
| | | | |
| | | | Firm/Company |
| | 624 | 8 N. MON | TIC ELLO |
| | | | Address |
| | CI | HICAGO | T/C ELLO Address TL 60659 City/State and Zip Code |
| | | ash@ a | has a map a stor low |
| | | 1:-mail address' (| bre properties. wy to be used for future annual report notification) |
| For furt | her information conce | rning this matter, pleas | se call |
| | Nachman Nach | Development Person | at (<u>173</u>) <u>726-3600</u> Area Code Daytime Telephone Number |
| | Mailing Address: Registration Secti | on | Street Address: Registration Section |
| | Division of Corp | orations | Division of Corporations The Centre of Tallahassee |
| | P.O. Box 6327 Tallahassee, FL. | 32314 | 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |
| | | e 🔠 \$130.00 Film | DEPARTMENT OF STATE |



November 14, 2022

NACHMAN BERGER 6248 N MONTICELLO CHICAGO, IL 60659

SUBJECT: NBRE LLC

Ref. Number: W22000142234

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

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not 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.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 922A00025288

www.sunbiz.org

Dirit and the DOMAGOR Will Block

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

| V | Limited Liability Cor | npany, must include "Limite | d I lability Company," "LI | .Č.,"or"I.(C") | |
|---|--|--|---|--|--|
| available, enter alternate r | name adopted for the pur | pose of transacting business in Fl | ksrida. The alternate name must | include "Limited Liability (| Company 11 L 11 er 11 |
| -1//4.010 | | | | | |
| diction under the law of w | hich foreign limited luib | thry company is organized) | 3 | +Hi number, it ap | plicable i |
| | | | | | |
| | (Date first transact (See sections 1995) | ed business in Horida, if prior to 1990 & 1981 & 1981 F. S. to determine | registration me penalty hability | | |
| 248 N, M | | | | go IL 6 | rcello |
| ess of Principal Office) | | | (Mailing Ad | dressi | |
| 1/CALes | IL 606 | 55P | Chica | 40 FL 6 | 0659 |
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| and street addres | <u>ss</u> of Florida regis | tered agent: (PO Box | NOT acceptable) | | |
| and <u>street addres</u> | · | · | | | |
| and <u>street addres</u> Name | Leah | Green | · | Vii. | |
| Name | Leah | Green | · | •••• ••••••••••••••••••••••••••••••••• | 2922 |
| Name | Leah | Green | · | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | 2922 De |
| Name | Leah | Green | · | 33140 | 2022 Dec. |
| Name Office Address | Leah 3630 M/AM/ | Green | · | 33140 1/10 esster | |
| Name Office Address red agent's accep | Leah 3630 M/AM/ | Green FLAHINGO I BEACH | SR Floric | ~ | (; · |
| Name Office Address red agent's acception named as read in this applica | Leah 3630 M/AM/ chance: egistered agent artion, I hereby acc | Green | . Hone process for the above s registered agent and | stated limited liabil. Lagree to act in this | ity corupany at the s capacity. I furth |

File Number

0544147-1



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

NBRE LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON SEPTEMBER 11, 2015. 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 7TH day of DECEMBER A.D. 2022.

Authentication #: 2234102542 verifiable until 12/07/2023

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

Desse White

SECRETARY OF STATE