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May 2, 2023

JENNIFER SMITH 6547 N. AVONDALE AVE. CHICAGO, IL 60631 US

SUBJECT: WHISPERING SANDS II LLC

Ref. Number: W23000063805

We have received your document for WHISPERING SANDS II LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

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.

Andrea Andrews Regulatory Specialist II



Letter Number: 923A00009847

COVER LETTER

Registration Section

TO:

Div	ision of Corporations					
CHD IFCT.	Whispering Sands II LLC					
SUBJECT.	Nam	Name of Limited Liability Company				
The enclosed Existence, ar	I "Application by Foreign Limited Liability and check are submitted to register the above	Company for Authorization to Transact Business in Florida." Certificate o referenced foreign limited liability company to transact business in Florida				
Please return	all correspondence concerning this matter t	o the following:				
	Jennifer Smith					
		Name of Person				
	Whispering Sands II LLC					
	Firm/Company 6547 N. Avondate Ave.					
		Address				
	Chicago, IL 60631					
	C	City/State and Zip Code				
	licenses@zemanhomes.com					
	E-mail address: (to be	e used for future annual report notification)				
For further in	nformation concerning this matter, please ca	II:				
Jen	nifer Smith	773 499-7255				
	Name of Contact Person	at () Area Code Daytime Telephone Number				
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				
Plea	elosed is a check for the following amount: ase make check payable to: FLORIDA DEF \$125.00 Filing Fee	ee & 🔲 \$155.00 Filing Fee & 🗏 \$160.00 Filing Fee, Certificate				

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:

1. Whispering Sands II LI						_
(Name of Foreign	Limited Liability Company; must include "Limite	d Liability Comp	any," "L.L.C.," or "LLC."}			
(If name unavailable, enter alternate r	name adopted for the purpose of transacting business in I	lorida. The alternate	name must include "Limited Liabil	hty Company," "L	.L.C," or "	_ I.I.C.")
Illinois 2.		26-04	435122			
(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.) nine penalty liability)				
6547 N. Avondale Avo			N. Avondale Ave.			
5. (Street Address of Principal Office)	·· - · · · · · · · · · · · · · · · · ·	· 	Mailing Address)			_
Chicago, IL 60631		Chicago, IL 60631				
						-
						-
7. Name and street address	ss of Florida registered agent: (P.O. Bo	NOT accept	able)		207	
				· .	ZÛZJ HAY	11-E
Name:	CT Corporation System		_	エン・	=	3 <u>6</u> 22991 19424
	1200 S. Pine Island Rd.			بر بر	7>	i ièi
Office Address:	<u> </u>		_	7	AH 8: 2	
	Plantation		33324 , Florida	•	}. 27	_
	(City)		(Zip code)			

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.

Joe Davis, Assistant Secretary

(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]:

Title or Capacity:	Name and Address:	Title or Capacity	Name and Address:
□Manager	Name: Edward Zeman	□Manager	Name: Patrick Zeman
≣ Member	Address: 6547 N. Avondale Ave.	□Member	Address: 6547 N. Avondale Ave.
□Authorized	Chicago, IL 60631	Authorized	Chicago, IL 60631
Person		Person	
□Other	Other	Other	Other
⊡Manager	Name:	□Manager	Mark Connolly
	Address: 6547 N. Avondale Ave.	□Member	Address:Avondale Ave.
■Authorized	Chicago, IL 60631	Authorized	Chicago, IL 60631
Person	-1	Person	
☐Other	Other	□Other	Other
□Manager	Name: Leslie Taylor-Rharbi	□Manager	Name:
□Member	Address: 3802 Ehrlich Rd., #102	□Member	Address:
≡ Authorized	Tampa, FL 33624	□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. Non-indexed 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 dogree felony as provided for in s.817.155, F.S.

Mark Connolly

Typed or printed name of signee

File Number

0226503-6



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, 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

WHISPERING SANDS II LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JULY 06. 2007, 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 5TH

day of APRIL A.D. 2023

Authentication #: 2309502088 verifiable until 04/05/2024

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

Aleja Dianarula....

SECRETARY OF STATE