# M23000001748

(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



900410280299

2023 JUN 14 PM 2:41

RECEIVED 2029 JUN 14 RH 3: 21 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 810809 4306601

AUTHORIZATION : (

COST LIMIT : \$ 125\00

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ORDER DATE: June 12, 2023

ORDER TIME : 1:35 PM

ORDER NO. : 810809-005

CUSTOMER NO: 4306601

#### FOREIGN FILINGS

NAME: RKL INDUSTRIAL 2 LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland-sorenson -- EXT#

EXAMINER:

#### COVER LETTER

	`	COVEREDITER
то:	Registration Section Division of Corporations	
SUBJI	RKL Industrial 2 LLC	
SUDO.		of Limited Liability Company
The en	nclosed "Application by Foreign Limited Liability Conce, and check are submitted to register the above re	ompany for Authorization to Transact Business in Florida," Certificate of ferenced foreign limited liability company to transact business in Florida
Please	e return all correspondence concerning this matter to	the following:
	Larecon f	Name of Person
	RUL IN	Firm/Company
		Address Hilly IZ 605/4
		y/State and Zip Code  I dinig to m  used for future annual report notification)
For fur	rther information concerning this matter, please call:	
		at (773) 209-8385 Area Code Daytime Telephone Number
	Mailing Address: Registration Section	Street Address: Registration Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following amount:  Please make check payable to: FLORIDA DEPA  S125.00 Filing Fee  \$130.00 Filing Fee	

## 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	name adopted for the purpose of transacting business in Flo	orida. The alternate name must include "Lir	mited Liability Company," "L.L.C," or "L	.LC.")	
Illinois 2.		3.			
(Jurisdiction under the law of which foreign limited liability company is organized		(FE	(FEI number, if applicable)		
4					
	(Date first transacted business in Florida, if prior to to (See sections 605,0904 & 605,0905, F.S. to determine	egistration.) ne penalty liability)			
15 Indian Drive 5.		15 Indian Drive 6.			
(Street Address of Principal Office)	· · · · · · · · · · · · · · · · · · ·	(Mailing Address)			
Clarendon Hills IL 60514		Clarendon Hills IL 60	0514		
<ol> <li>Name and <u>street address</u></li> <li>Name:</li> </ol>	ss of Florida registered agent: (P.O. Box  Corporation Service Company	NOT_acceptable)	2023 JUN 1	9 9 71-1	
		NOT_acceptable)	2023 JUN 14 PM	g grant	
Name:	Corporation Service Company	3230	BJUNIL PM 2		
Name:	Corporation Service Company 1201 Hays Street		3 JUN 14 PM 2: 4		

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	<u>:</u>	Name and Address:
■Manager	Name: Kareem Fikri	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized	Clarendon Hills IL 60514	□Authorized		
Person		Person		
□Other	Other	Other		Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other	□Other	□Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		<del></del>
Person		Person	<del></del>	
□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 copstitutes a third degree felony as provided for in s.817.155, F.S.

Signature of an authorized person

#### File Number

1336183-5



## 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

RKL INDUSTRIAL 2 LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON JUNE 12, 2023, 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 12TH day of JUNE A.D. 2023 .

Authentication #: 2316303270 verifiable until 06/12/2024

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

Alexi Giannol

SECRETARY OF STATE