

M24000006898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

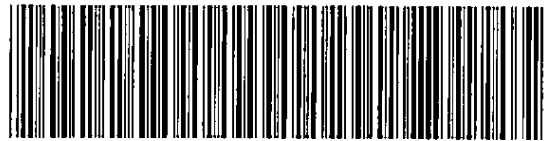
Certificates of Status _____

Special Instructions to Filing Officer:

use
2nd
cert

W24-79074

Office Use Only



400429989284

2024 MAY 22 PM 11:33

RECEIVED
FBI - MEMPHIS
MAY 22 2024

RECEIVED
MAY 22 2024 PM 3:36

JUN 03 2024

K. Brumley



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2024 MAY 31 AM 10:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 23, 2024

CT

SUBJECT: CRESA, LLC
Ref. Number: W24000079074

CORRECTED
Please Allow For
Same File Date

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

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is P93000028536.

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.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 524A00011340

CT CORP
(850) 656-4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 05/22/2024
Acc#120160000072

en: c DW

Name:	CRESA, LLC
Document #:	
Order #:	15544052

Certified Copy of Arts & Amend:	<input type="checkbox"/>	1-2 FILING	
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>	withdrawal 1st - registration 2nd	
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

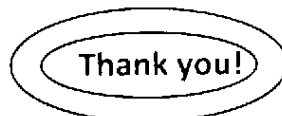
Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notifications:

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Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **155.00**



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRESA, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

DAVID LYNN

Name of Person

BAKER & MCKENZIE LLP

Firm/Company

300 E. RANDOLPH ST., STE 5000

Address

CHICAGO, IL 60601

City/State and Zip Code

JSCOTT@CRESA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID LYNN

312

9370687

at ()

Name of Contact Person

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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. CRESA, LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC.")

Cresa Florida, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. DELAWARE
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 81-4198347
(FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 167 N. GREEN ST. STE. 1301
(Street Address of Principal Office)

6. 167 N. GREEN ST. STE. 1301
(Mailing Address)

CHICAGO, IL 60607

CHICAGO, IL 60607

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(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.

By: C T Corporation System
Stephanie Hencz Stephanie Hencz, Assistant Secretary
(Registered agent's signature)

2021 MAY 22 PM 11:23

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:**

☒ Manager Name: TOD LICKERMAN

☐ Member Address: 167 N. GREEN ST. STE. 1301

☐ Authorized CHICAGO, IL 60607

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: GARY GREGG

☐ Member Address: 167 N. GREEN ST. STE. 1301

☐ Authorized CHICAGO, IL 60607

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: SHARON MORRISON

☐ Member Address: 167 N. GREEN ST. STE. 1301

☐ Authorized CHICAGO, IL 60607

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☒ Manager Name: GREG SCHEMENTI

☐ Member Address: 167 N. GREEN ST. STE. 1301

☐ Authorized CHICAGO, IL 60607

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: THOMAS BIRNBACH

☐ Member Address: 167 N. GREEN ST. STE. 1301

☐ Authorized CHICAGO, IL 60607

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: TOM TINDALL

☐ Member Address: 167 N. GREEN ST. STE. 1301

☐ Authorized CHICAGO, IL 60607

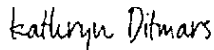
Person _____

☐ 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 degree felony as provided for in s.817.155, F.S.

DocuSigned by

 B7B6A7C81CA414 Signature of an authorized person

KATHRYN DITMARS, SECRETARY

Typed or printed name of signee

MANAGERS OF CRESA, LLC

Gary Gregg 167 N. Green St. Ste. 1301 Chicago, IL 60607	James Saunders 167 N. Green St. Ste. 1301 Chicago, IL 60607
Thomas Birnbach 167 N. Green St. Ste. 1301 Chicago, IL 60607	Jerry (Rick) Door 167 N. Green St. Ste. 1301 Chicago, IL 60607
Tod Lickerman 167 N. Green St. Ste. 1301 Chicago, IL 60607	Brant Bryan 167 N. Green St. Ste. 1301 Chicago, IL 60607
Greg Schementi 167 N. Green St. Ste. 1301 Chicago, IL 60607	Suellen Ravanis 167 N. Green St. Ste. 1301 Chicago, IL 60607
Sharon Morrison 167 N. Green St. Ste. 1301 Chicago, IL 60607	Angela Roseboro 167 N. Green St. Ste. 1301 Chicago, IL 60607
Tom Tindall 167 N. Green St. Ste. 1301 Chicago, IL 60607	

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CRESA, 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 SEVENTH DAY OF MAY, A.D. 2024.

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



6185726 8300

SR# 20241939756

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 203419586

Date: 05-07-24