

M99000001505

ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: 9900000000

REFERENCE: 1529440
(Sub Account)

DATE: 9-24

REQUESTOR NAME: LEXIS

ADDRESS:

TELEPHONE: () () ext ()

CONTACT NAME:

CORPORATION NAME: Harbor Bluffs Venture, LLC

DOCUMENT NUMBER: (if applicable)

AUTHORIZATION: C. Woodyard

☒ CERTIFIED COPY (1-9)
☐ CERTIFICATE OF STATUS (1-9)
☐ PLAIN STAMPED COPY

500002996285-4

☒ Call When Ready () Call if Problem () After 4:
Walk In () Will Wait () Pick Up
() Mail Out

RECEIVED

99 SEP 24 AM 11:32

LEWIS & CLARK
DIVISION OF STATE
TALLAHASSEE, FLORIDA

FILED
DIVISION OF STATE
CORPORATIONS
99 SEP 24 PM 2:03

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File
2nd

BR 9/24/99

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 SEP 24 PM 2:03

1. Harbor Bluffs Venture, LLC
(Name of foreign limited liability company must end with the words "limited company" or their abbreviation "L.C." if not so contained in the name at present.)
2. Illinois
(Jurisdiction under the law of which foreign limited liability company is organized)
3. Applied for
(FEI number, if applicable)
4. 8/25/99
(Date of Organization)
5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Date of qualification
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 2275 Half Day Road; Bannockburn, IL 60015
(Street address of principal office)

8. List name, title, and business address of each managing member[MGRM] or manager[MGR] who will manage the foreign limited liability company in Florida: (attach additional page if necessary)

NAME & ADDRESS:	TITLE:	NAME & ADDRESS:	TITLE:
<u>Bluffco, Inc.</u>	<u>MGRM</u>		
<u>2275 Half Day Road</u>			
<u>Bannockburn, IL</u>			
<u>60015</u>			

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

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PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Harbor Bluffs Venture LLC

2. The name and the Florida street address of the registered agent and office are:

Jill Strumpf

(Name)

314 S. Missouri Avenue, Suite 305

Florida street address (P.O. Box **NOT** ACCEPTABLE)

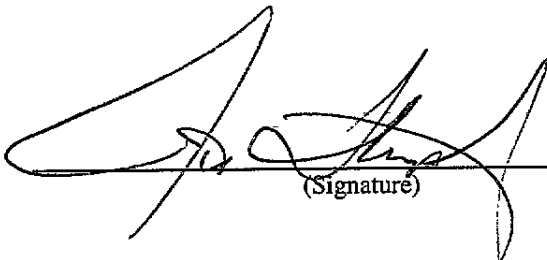
Clearwater

FL

34616 33756

City/State/Zip

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Signature)

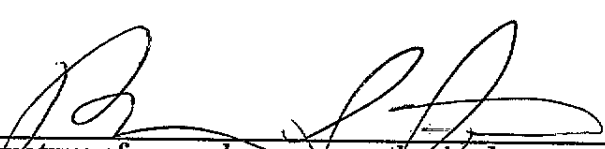
Filing Fee: \$ 35 for Designation of Registered Agent

**AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN
LIMITED LIABILITY COMPANY**

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DIVISION OF CORPORATIONS
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The undersigned member or authorized representative of a member of Harbor Bluff,
Venture LLC certifies:

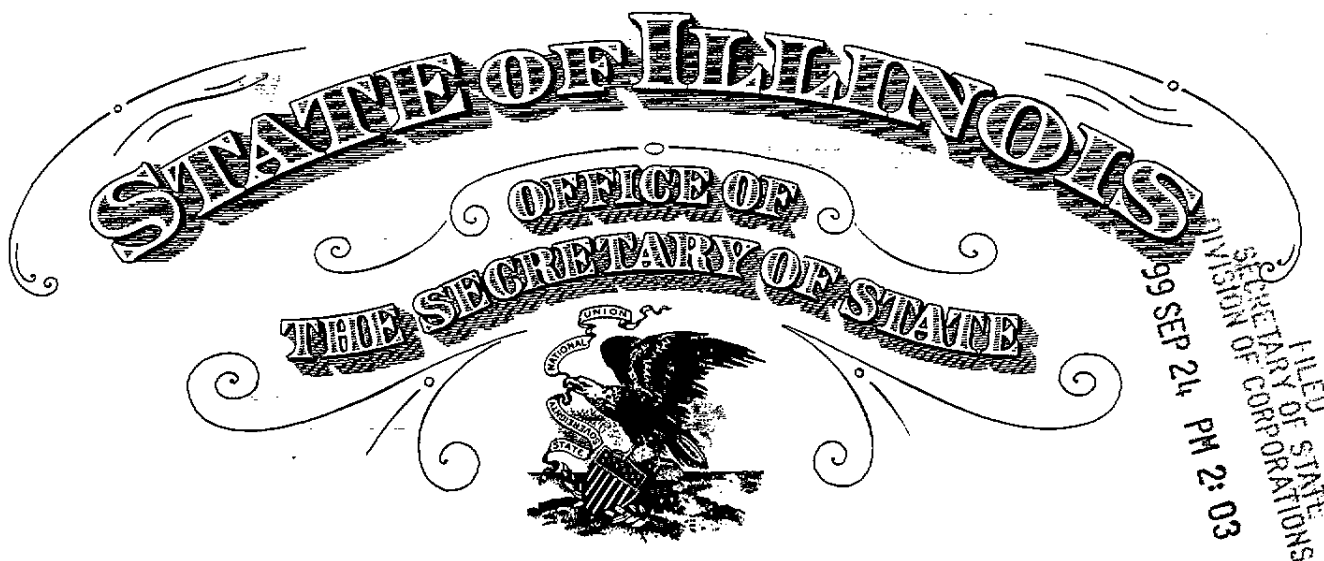
- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the member(s) is \$ 450,000;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ _____;
(A description of the property is attached and made a part hereto.)
and
- 4) the total amount of cash and property contributed and anticipated to be contributed
by member(s) is \$ 450,000.
(This total includes amounts from 2 and 3 above.)


Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), Florida Statutes, the execution of this
affidavit constitutes an affirmation under the penalties of perjury that the facts
stated herein are true.)

Benjamin D. Steiner, Counsel
Typed or printed name of signee

Filing Fee: \$250.00 for Application and Affidavit

File Number 0031786-1



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

HARBOR BLUFFS VENTURE LLC,
HAVING ORGANIZED IN THE STATE OF ILLINOIS ON AUGUST 25, 1999,
APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED
LIABILITY COMPANY ACT OF THIS STATE RELATING TO THE FILING
OF THE ARTICLES AND PAYMENT, AND IS ORGANIZED TO TRANSACT
BUSINESS 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* 14TH
day of SEPTEMBER A.D. 1999

Jesse White

SECRETARY OF STATE