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#### **COVER LETTER**

TO:							
		•		nov Inc			
SUBJ	ECT:	Chicago Financial Technology, Inc.  Name of corporation - must include suffix  adam:  "Application by Foreign Corporation for Authorization to Transact Business in Florida," Existence," or "Certificate of Good Standing" and check are submitted to register the ged foreign corporation to transact business in Florida.  all correspondence concerning this matter to the following:  General Cousel  Name of Person  ial Technology, Inc.  Firm/Company  an Avenue, Suite 3A  Address  is 60605  City/State and Zip code  tet  E-mail address: (to be used for future annual report notification)  formation concerning this matter, please call:  at (					
			Name	ot corporati	on - mu:	st include suffix	
Dear S	Sir or Mada	m:					
"Certi	ficate of Ex	istence	," or "Certifical	te of Good St	anding"	and check are sub	
Please	return all c	orrespo	Name of corporation - must include suffix  Name of corporation - must include suffix  on by Foreign Corporation for Authorization to Transact Business in Florida,"," or "Certificate of Good Standing" and check are submitted to register the corporation to transact business in Florida.  Ondence concerning this matter to the following:  asel  Name of Person  ogy, Inc.  Firm/Company  Suite 3A  Address  City/State and Zip code  E-mail address: (to be used for future annual report notification)  concerning this matter, please call:  at (				
Jodi C	ordeiro, Gen	Name of corporation - must include suffix  r Madam:  sed "Application by Foreign Corporation for Authorization to Transact Business in Florida," te of Existence," or "Certificate of Good Standing" and check are submitted to register the erenced foreign corporation to transact business in Florida.  urn all correspondence concerning this matter to the following: irio, General Cousel  Name of Person  nancial Technology, Inc.  Firm/Company  ichigan Avenue, Suite 3A  Address  Unionis 60605  City/State and Zip code inc.net  E-mail address: (to be used for future annual report notification)  r information concerning this matter, please call: irio  312  588-0006  at (					
				Name o	of Person	n	
Chicag	go Financial	Technol	ogy, Inc.				
				Firm/Co	mpany		
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For fu	rther inforn	nation o	oncerning this	matter, pleas	e call:		
Jodi C	ordeiro				58	8-0006	
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	2661 Exe	cutive (					
Enclos	sed is a che	ck for t	he following an	nount:			
<b>□</b> \$70	0.00 Filing	Fee					

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	orp," "Inc," "Co," or "Corp.")			
CFT, Inc.				
(If name unavaila Illinois	ible in Florida, enter alternate corporate name adop 36-	3785471	·	
	y under the law of which it is incorporated)	(FEI number, if applicable)		
·	of incorporation)	(Date of duration, if other than perpetual)		
	(SEE SECTIONS 607.1501 & 607.1502, nology Circle, Suite 215, Coconut Creek, Florida 3  (Principal o			
1556 S. Michigar	Avenue, Suite 3A Chicago, Illinois 60605		ب. س	
	(Current mailing ad	idress, if different)	<u> </u>	
Name and street address of Florida registered agent: (  Ireneusz Kozioł  Name:		ox <u>NOT</u> acceptable)		
ffice Address:	6820 Lyons Technology Circle, Suite 215	_		
	Coconut Creck	33073 , Florida (Zip code)	(∴ <b>v</b> æ	
laving been nam esignated in this orther agree to co	ent's acceptance: ed as registered agent and to accept service of application, I hereby accept the appointment comply with the provisions of all statutes related amiliar with and accept the obligations of my	f process for the above stated c as registered agent and agree ive to the proper and complete	to act in this capaci	

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

11. Names and business addresses of officers and/or directors: A. DIRECTORS Ireneusz Koziol Chairman: 1556 S. Michigan Avenue, Suite 3A Address: Chicago, Illinois 60605 Vice Chairman: Address: Director: Address: Director: **B. OFFICERS** Ireneusz Koziol President: 1556 S. Michigan Avenue, Suite 3A Address: Chicago, Illinois 60605 Vice President: Address: Jodi Cordeiro 1556 S. Michigan Avenue, Suite 3A, Chicago, Illinois 60605 Treasurer: NOTE: If necessary, you may attach an addendum to the transferation listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein

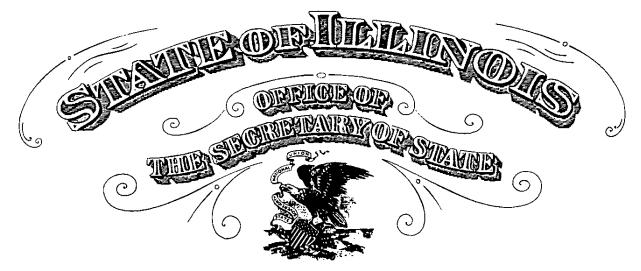
The officer or director signing this document (and who is bisted in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Treneusz Koziol

(Typed or printed name and capacity of person signing application)

#### File Number

5636-815-9



## 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

CHICAGO FINANCIAL TECHNOLOGY INCORPORATED, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON APRIL 29, 1991, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION 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 28TH day of SEPTEMBER A.D. 2016 .

Authentication #: 1627202854 verifiable until 09/28/2017
Authenticate at: http://www.cyberdriveillinois.com

se while

SECRETARY OF STATE