F10000005321

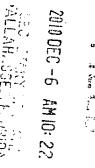
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Pilone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Chirty Maine)
(Document Number)
,
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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2553

First Cast, Inc

6045 Sherwin Dr Port Richey, FL 34668 Ph: 727-845-3737 - Fax: 727-849-2248

Dec 1, 2010

Attn: Justin M Shivers Florida Department of State Division of Corporations P O Box 6327 Tallahassee, FL 32314

Subject: First Cast, Inc

Ref Number: W10000054284

Dear Mr. Shivers,

We are asking you to reconsider making the name of First Cast, Inc available. The reason you show making it unavailable is due to our own company, First Cast, LLC.

First Cast, LLC has been administratively dissolved. We found that we needed to incorporate the company. As the only officer of this company, I would like to confirm that we have no intention of ever reinstating the name of First Cast, LLC.

The amended document with changes you requested is attached, along with your original letter.

Respectfully,

William F Cullerton

Willian F Cultur

President

COVER LETTER

TO: New Filing Section Division of Corporations		
SUBJECT: First Cast, Inc		
	ion - must include suffix	
Dear Sir or Madam:		
The enclosed "Application by Foreign Corporation f "Certificate of Existence," or "Certificate of Good S above referenced foreign corporation to transact bus	tanding" and check are submit	
Please return all correspondence concerning this mat	tter to the following:	
William Cullerton		
Name	of Person	
First Cast, LLC		
Firm/C	ompany	
6045 Sherwin Dr		
Ad	ldress	
Port Richey, FL 34668		
City/Stat	e and Zip code	
info@cotee.com		
E-mail address: (to be use	ed for future annual report noti	ification)
For further information concerning this matter, pleas	se cail:	
Barb Halbrooks at (727) 845-3737	
	ea Code & Daytime Telephone	e Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADI New Filing Secti Division of Corp P.O. Box 6327 Tallahassee, FL	on orations
Enclosed is a check for the following amount:		
\$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

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.

Illinois	lable in Florida, enter alternate corporate nam	e adopted for the purpose of tra	insacting business in Florida)
	3	27-3789545	
(State or country	under the law of which it is incorporated)	(FEI number,	, if applicable)
10/22/10	5	Perpetual	
(Date	of incorporation)	(Duration: Year corp. will o	cease to exist or "perpetual")
			Fig. B.
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1	in Florida, if prior to registratio	n)
SOAS Shor			The same of the sa
0040 OHEIV	vin Drive, Port Richey, FL 34 (Principal office ad		
Same	(1 morph of the desired and	in this j	
Jane	(Current mailing add	dress)	
			28
	of corporation authorized in home state or c t address of Florida registered agent: (P.C	-	ok riterita)
Name:	JAMES H. DIVON, JR	CPA - JIM DIXOR	N CONSULTING CP
ice Address:	3450 EAST LAKE ROA	- •	
nce Address.	~	m. u. 2/1/00	
ico Audioss.	PALM HARBOR (City)	, FIORIDA _ 24655	<u>.</u>

11. 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.

12. Names and business addresses of officers and/or directors:			
A. DIRECTORS			
Chairman:	··········		
Address:			
Vice Chairman:			
Address:		·	
Director:	·		
Address:			
Director:			
Address:			
		2	
B. OFFICERS	100		*
President: William F Cullerton	# · :	EC -	morenteria: per consiste
Address: 1220 Royal St George	<u> </u>	5 	4
Naperville, IL 60563	<u>.</u>	<u>ö</u>	'Annu f
Vice President:	P of boson to prove p	22	
Address:			
Secretary:			
Address:			·
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addendum to the application listing additional officers a	nd/or di	rectors.	
13. William 7 Culleut Signature of Director or Officer			
Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that are true and that he or she is aware that false information submitted in a document to the Department third degree felony as provided for in s.817.155, F.S.	the fact	s stated	

File Number. . . 6725-185-7



To all to whom these Presents Shall Come, Greeting:

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

FIRST CAST, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 22, 2010, 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.



Authentication #: 1031501160

Authenticate at: http://www.cyberdriveillinois.com

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 11TH

day of NOVEMBER

A.D.

2010

Desse White

SECRETARY OF STATE