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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: Dyson Direct, Inc.	
Name of corporat	ion - must include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation of "Certificate of Existence," or "Certificate of Good Sabove referenced foreign corporation to transact bus	Standing" and check are submitted to register the
Please return all correspondence concerning this ma	atter to the following:
Tax Department	
Name	of Person
Dyson Direct, Inc.	
Firm/C	Company
600 W. Chicago Ave., Suite 27	75
Chicago, IL 60654	ldress
	e and Zip code
	ed for future annual report notification)
For further information concerning this matter, please	se call:
Beth Thomey 312	846-7755
Name of Person Ar	ea Code & Daytime Telephone Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:	
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & ■ \$87.50 Filing Fee, Certified Copy

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.

11111111111111	, , , , , , , , , , , , , , , , , , , ,	ne adopted for the purpose of transacting business in F	lorida)
<u>Illinois</u>		3. 81-0596866	
•	under the law of which it is incorporated)	(FEI number, if applicable)	
9/19/200	e of incorporation)	5. Perpetual (Duration: Year corp. will cease to exist or "perpe	**************************************
	of incorporation)	(Duration: Year corp. will cease to exist of perpe	ctual)
•		s in Florida, if prior to registration) .1502, F.S., to determine penalty liability)	
600 W. C	hicago Ave., Suite 275, C	chicago, IL 60654	
	(Principal office ac		
600 W. CI	hicago Ave., Suite 275, Ch	icago, IL 60654	
	(()		
	(Current mailing ac	ddress)	
Sale and			
	service of electronic con	sumer products	1
(Purpose(service of electronic con	sumer products country to be carried out in state of Florida)	TIL MAY I
(Purpose(service of electronic cons) of corporation authorized in home state or et address of Florida registered agent: (F	sumer products country to be carried out in state of Florida) P.O. Box NOT acceptable)	$\overline{\omega}$
(Purpose(service of electronic con	sumer products country to be carried out in state of Florida) P.O. Box NOT acceptable)	3
(Purpose(service of electronic cons) of corporation authorized in home state or et address of Florida registered agent: (F	sumer products country to be carried out in state of Florida) P.O. Box NOT acceptable)	13 AM 8:
(Purpose(s) Name and streethers) Name:	service of electronic cons) of corporation authorized in home state or et address of Florida registered agent: (F	sumer products country to be carried out in state of Florida) P.O. Box NOT acceptable) pany	3
(Purpose(see Name and street) Name:	service of electronic cons) of corporation authorized in home state or et address of Florida registered agent: (Florida Service Comparation Service Comparation Street	sumer products country to be carried out in state of Florida) P.O. Box NOT acceptable)	13 AM 8:
(Purpose(s Name and <u>stre</u> Name: ffice Address:	service of electronic constant of corporation authorized in home state or et address of Florida registered agent: (Florida Service Comparts of Service Comparts of Hays Street Tallahassee (City)	sumer products country to be carried out in state of Florida) P.O. Box NOT acceptable) pany , Florida 32301	13 AM 8:
(Purpose(s) Name and stree Name: ffice Address:	service of electronic constant of corporation authorized in home state or et address of Florida registered agent: (Florida Corporation Service Computation Service Computation Street Tallahassee (City) gent's acceptance:	country to be carried out in state of Florida) P.O. Box NOT acceptable) pany , Florida 32301 (Zip code)	13 AM 8: 05
(Purpose(see Name and street) Name: Name: ffice Address: O. Registered a laving been names ignated in this	service of electronic cons) of corporation authorized in home state or et address of Florida registered agent: (Factorial Corporation Service Compactorial Hays Street Tallahassee (City) gent's acceptance: and as registered agent and to accept service application, I hereby accept the appoint	sumer products country to be carried out in state of Florida) P.O. Box NOT acceptable) pany , Florida 32301 (Zip code) rvice of process for the above stated corporation at the following state of the state of Florida)	at the plans capacity
(Purpose(s) Name and street Name: Office Address: Office Addre	service of electronic cons) of corporation authorized in home state or et address of Florida registered agent: (Factorial Corporation Service Compactorial Hays Street Tallahassee (City) gent's acceptance: and as registered agent and to accept service application, I hereby accept the appoint	sumer products country to be carried out in state of Florida) P.O. Box NOT acceptable) pany , Florida 32301 (Zip code) rvice of process for the above stated corporation at the selection of the proper and complete performant	at the plans capacity

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: _ **B. OFFICERS** President: Ed Culley Address: 600 W. Chicago Ave., Suite 275 Chicago, IL 60654 Vice President: Rob Cherry Address: 600 W. Chicago Ave., Suite 275 Chicago, IL 60654 Secretary: Jason Brown Address: 600 W. Chicago Ave., Suite 275, Chicago, IL 60654 Treasurer: NOTE: If necessary, you may attach an addendura to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 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. 14. Rob Cherry, Vice President, Finance and Operations

File Number

6245-182-3



To all to whom these Presents Shall Come, Greeting:

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

DYSON DIRECT, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON SEPTEMBER 19, 2002, 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 #: 1407902668

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 20TH

day of

MARCH

A.D.

2014

Jesse Whit

SECRETARY OF STATE