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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FC4000000023  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please:\*\*

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FOREIGN PROFIT/NONPROFIT CORPORATION  
HEXACOMB CORPORATION

Certificate of Status	0
Certified Copy	1
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K. SALY  
FEB 26 2019

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.

1. Hexacom Corporation
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Illinois 3. 36-3670404
(State or country under the law of which it is incorporated) (FEF number, if applicable)

4. 05/31/1988 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. Open Qualification
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1 North Field Court, Lake Forest, IL 60045
(Principal office address)

Same
(Current mailing address, if different)

8. 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)

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9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

C T Corporation System

James M. Halpin
Assistant Secretary

By: [Signature]
(Registered agent's signature)

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.

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11. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: SEE ATTACHMENT

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: SEE ATTACHMENT

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

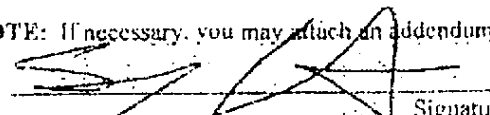
Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.  \_\_\_\_\_  
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 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. S. Ellis Cunningham, Assistant Secretary

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

Attachment

**Officers and Directors for Hexacomb Corporation**

<u>Director</u>	<u>Office</u>	<u>Business Address</u>
Kent A. Pflederer	Sole Director	1 North Field Court Lake Forest, IL 60045

<u>Officers</u>	<u>Office</u>	<u>Business Address</u>
Thomas A. Hassfurther	President	1 North Field Court Lake Forest, IL 60045
Pamela A. Barnes	Vice President and Treasurer	1 North Field Court Lake Forest, IL 60045
Bruce K. Ellsberry	Vice President	1 North Field Court Lake Forest, IL 60045
Darla J. Olivier	Vice President	1 North Field Court Lake Forest, IL 60045
Joseph F. Perry	Vice President	1 North Field Court Lake Forest, IL 60045
Kent A. Pflederer	Vice President and Secretary	1 North Field Court Lake Forest, IL 60045
Thomas W. Walton	Senior Vice President	1 North Field Court Lake Forest, IL 60045
S. Ellis Cunningham	Assistant Secretary	101 South Capitol Blvd., Suite 800 Boise, ID 83702
Tony Steenkolk	Assistant Secretary	1 North Field Court Lake Forest, IL 60045
Francine M. Hori	Assistant Treasurer	1 North Field Court Lake Forest, IL 60045

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File Number 5510-240-6



**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*

HEXACOMB CORPORATION, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MAY 31, 1988, 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 7TH day of JANUARY A.D. 2019 .*

*Jesse White*

SECRETARY OF STATE