FOR PROFIT CORPORATION HIMIEODM BHIGINIEGG DEDODT (HRD)

Oiti	OIZIN DOGINE		(ODIC)				
DOCUMENT # F990002290					02 OCT 11 PM 2: 00		
1. Entity Name SVC Equipment company					SECRETARY OF STATE FALLAHASSEE. FLORIDA		
DO NOT WRITE IN THIS SPACE					500008403275 10/16/0201070016 **550.00		
2. Principal Place of Business 3. Mailing Address 90 Suite, Apt. #, etc. 3. Mailing Address 90 Anderso Suite, Apt. #, etc. Suite, Apt. #, etc.			1.	DO NOT WRITE IN THIS SPACE			
City & State Chicago II City & State		J	4.	4. FE! Number Applied F 36 - 42(69344 Not Appli			
60610	Country USA	Zip 10577	Country USA	5.	Certificate of Status Desired	\$8.75 Additional Fee Required	
SIGNATURE	DO NOT W IN THIS SP entity submits this statement for	ACE the purpose of changing its re	1 200 City D	dress (P.O. E	gent, or both, in the State of Florida.	ad - 333324	
9. This corporation is eligible to satisfy its Intengible Tax filing requirement and elects to do so. (See criteria on back) January 1 - May 1 After May 1, F Amended UE Make Check Payable to					10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
TITLE COVER STREET ADDRESS TOO CITY-ST-ZIP PARCEL	OFFICERS AND I CELON + Presider Anderson Hill Drage, by 105 anderson Hill Ad. Mase, by 1057 hase, b	17 77	TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE				
STREET ADDRESS 700 Anderson Hill 20.		STREET ADDRESS	, -	DO NOT WE			

Hichael T. Welch 1105 D. Harket St STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP wilmington, DE I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an

STREET ADDRESS

CHY-ST-ZIP

CTLY+ST-ZIP

CITY-ST-ZIP

THLU

NAME

TITLE

NAME STREET ADDRESS

TITLE

SIC	N۵	ITA	JRE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

TITLE

TITLE

NAME

NAME-

NP & secvetary Brian worse 700 Anderson Hill 20.

Brodentor, FL 34208

attachment with an address, with all other like empowered.

Hirchase, WY

NAME Thomas Ryan STREET ADDRESS TOOL 13Th Ave 8.

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10577

Date Daytime Phone #

DO NOT WRITE

IN THIS SPACE