

F/600000/609

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

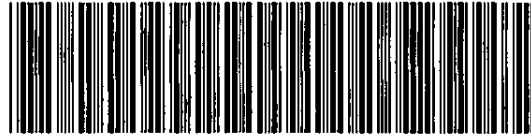
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300284068633

STATE OF FLORIDA  
TALLAHASSEE, FL 32301

2016 APR -6 AM 9:43


FILED

16 APR -6 AM 11:10

RECEIVED  
DEPARTMENT OF - (AT)

K. SALY  
EXAMINER  
APR -7

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 091266 4304335  
AUTHORIZATION :   
COST LIMIT : \$ 70.00

ORDER DATE : April 5, 2016  
ORDER TIME : 10:23 AM  
ORDER NO. : 091266-005  
CUSTOMER NO: 4304335

FOREIGN FILINGS

NAME: HAND2MIND, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** hand2mind, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

BONNIE YANCY

Name of Person

MUCH SHELIST, P.C.

Firm/Company

191 N WACKER DRIVE, SUITE 1800

Address

CHICAGO, IL 60606

City/State and Zip code

byancy@muchshelist.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bonnie Yancy

at ( 312 ) 521-2184

Name of Person

Area Code

Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

### MAILING ADDRESS:

Registration 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 & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & 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.*

hand2mind, Inc.

1. hand2mind, Inc.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

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

2. Illinois 3. 36-0972955  
(State or country under the law of which it is incorporated) (FEI number, if applicable)  
4. 9/29/1905 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)

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

7. 500 Greenview Court  
(Principal office address)  
Vernon Hills, IL 60061  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(City) (Zip code)

**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.*

Corporation Service Company

By:   
(Registered agent's signature)

Courtney Williams  
Asst. Vice President

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.

FILED  
2016 APR -6 AM 9:43  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

Chairman: See attached.

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

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

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

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

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

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

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

**B. OFFICERS**

President: See attached.

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. William Chiasson \_\_\_\_\_  
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. William Chiasson President \_\_\_\_\_  
(Typed or printed name and capacity of person signing application)

FILED

2016 APR -6 AM 9:43

RECEIVED  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA

**Attachment to Application by Foreign Corporation for Authorization to Transact Business in Florida**  
**hand2mind, Inc.**

Names and addresses of officers and directors:

**Directors:**

<b>Name</b>	<b>Address</b>
Richard M. Woldenberg	500 Greenview Court, Vernon Hills, IL 60061
Jane Woldenberg	500 Greenview Court, Vernon Hills, IL 60061

**Officers:**

<b>Title</b>	<b>Name</b>	<b>Address</b>
President	William Chiasson	500 Greenview Court, Vernon Hills, IL 60061
Chairman of the Board	Richard M. Woldenberg	500 Greenview Court, Vernon Hills, IL 60061
CFO	Edward Stassen	500 Greenview Court, Vernon Hills, IL 60061
Secretary	Richard M. Woldenberg	500 Greenview Court, Vernon Hills, IL 60061

FILED  
2016 APR -6 AM 9:43  
CLERK OF CIRCUIT COURT  
TALLAHASSEE FLORIDA

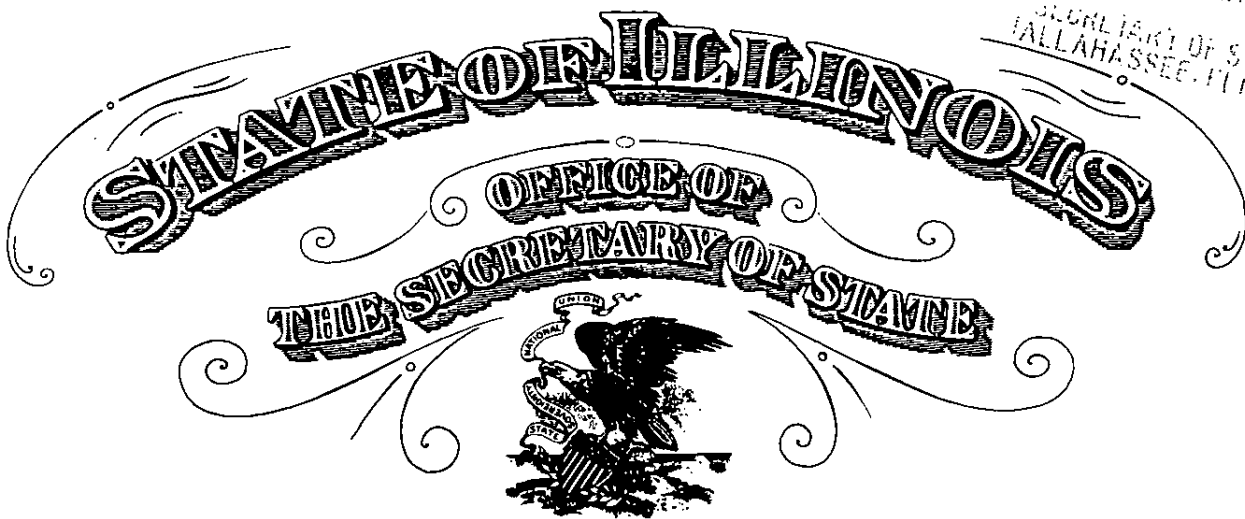
File Number

0969-063-8

FILED

2016 APR -6 AM 9:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**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*

HAND2MIND, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON SEPTEMBER 29, 1905, 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 9TH  
day of MARCH A.D. 2016 .***

*Jesse White*

SECRETARY OF STATE