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COVER LETTER

TO:		tion Section of Corporations		
SUBJ		IDM AGENCY INC.		
SOBI	ECI:	Nan	ne of corporation	- must include suffix
Dear S	Sir or Mada	im:		
"Certif	ficate of E	pplication by Foreign xistence," or "Certific foreign corporation t	ate of Good Star	Authorization to Transact Business in Florida," ding" and check are submitted to register the ss in Florida.
Please		correspondence conce	erning this matter	to the following:
		······	Name of	Person
	GELT	CO, INC.		
			Firm/Com	pany
	425 HU	EHL RD BLDG 4 B		
• • • • • • • • • • • • • • • • • • • •	NORTH	BROOK, IL 60062	Addre	SS
al	lannah@idr	nbrand.com	City/State a	nd Zip code
	-	E-mail addr	ess: (to be used t	or future annual report notification)
For fur	ther inforr	nation concerning thi	s matter, please c	all:
DMITRIY MELESHKO		847 at (279-8448	
	Name of	Person Person	Area Cod	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		
Enclose	ed is a che	ck for the following a	mount:	
\$ \$70	0.00 Filing		ling Fee & □ e of Status	\$78.75 Filing Fee &



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 3, 2017

DMITRIY MELESHKO 425 HUEHL RD BLDG 4B NORTHBROOK, IL 60062

SUBJECT: IDM AGENCY INC. Ref. Number: W17000010213

2011 FEB 22 PM 2: 44

2011 FEB 22 PM 2: 44

We have received your document for IDM AGENCY INC. and your check(s) totaling \$75.00 of which \$70.00 has been applied to file the other document(s)-leaving a balance of \$5.00 to file this document. However, the document has not been filed and is being retained in this office for the following:

Unfortunately, the enclosed certified copy does not meet our filing requirements. We require a certificate of existence or certificate of good standing, which usually consists of a single sheet of paper that clearly reflects the entity is a valid entity in its home state/country. You can obtain the certificate of existence or certificate of good standing from the same office that provided you with the certified copy.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 017A00002270

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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. IDM AGENCY 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) ILLINOIS 36-4468968 (State or country under the law of which it is incorporated) (FEI number, if applicable) 08/24/2001 (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 3510 KRAFT RD., SUITE 200, NAPLES FL 34105 (Principal office address) 870 WOODBINE RD., HIGHLAND PARK IL 60035 (Current mailing address. if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) ALLA TSIMIS Name: 3510 KRAFT RD., SUITE 200 Office Address: **NAPLES** (City) 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.

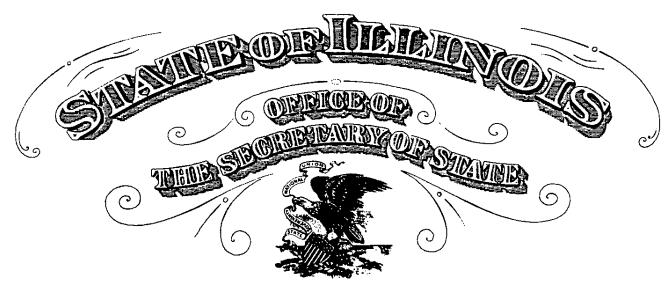
10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

A. DIREC	es and business addresses of officers and/or directors:		
	'ALLA TSIMIS		
	870 WOODRINE RD		
	HIGHLAND PARK IL 60035		
Vice Chairr	man:		
			· · · · · · · · · · · · · · · · · · ·
Director: _			·
Address: _			
Director: _			
Address: _			
-			
B. OFFIC			
President: _	ALLA TSIMIS		
	870 WOODBINE RD		
	HIGHLAND PARK IL 60035		
Vice Preside	OLGA WEISS ent:	17 F	
	1013 6TH STREET	£8 2	#:# <u></u>
	SANTA MONICA, CA 90403	-> -	777
Secretary:			NTS.
			100 + 11 100 100 100
			
	necessary, you may attach an addendum to the application listing additional officers and/or direct	ors.	
12.	art		
The officer are true and a third degr	Signature of Director or Officer r or director signing this document (and who is listed in number 11 above) affirms that the facts stand that he or she is aware that false information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.	ated he	rein itutes
13A	LLA TSIMIS, PRESIDENT		
	(Typed or printed name and capacity of person signing application)		

File Number

6179-986-9



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

IDM AGENCY INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON AUGUST 24, 2001, 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 13TH day of FEBRUARY A.D. 2017.

Authentication #: 1704401394 verifiable until 02/13/2018
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE