

# FOI000001358

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

For Amen  
TS 4/1/05

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: BLACK TIE EVENT SERVICES, INC.  
(Name of corporation)

DOCUMENT NUMBER: FO1000001358

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RUTH SCHMIDT  
(Name of person)

BLACK TIE EVENT SERVICES, INC.  
(Name of firm/company)

1515 CANAL STREET  
(Address)

LOCKPORT, IL. 60441  
(City/state and zip code)

For further information concerning this matter, please call:

RUTH SCHMIDT at ( 815 ) 834-9000  
(Name of person) (Area code & daytime telephone number)

Enclosed is a check for the following amount:

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> \$35.00 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
|---|---|--|---|

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

February 24, 2005

RUTH SCHMIDT  
1515 CANAL ST  
LOCKPORT, IL 60441

SUBJECT: BLACK TIE SERVICES, INC.  
Ref. Number: F01000001358

We have received your document for BLACK TIE SERVICES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

An original, duly authenticated certificate from the state of incorporation/organization evidencing the amendment, must be submitted with the application. The certificate must have been issued within the past 90 days.

Please return your document, along with 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) 245-6927.

Tracy Smith  
Document Specialist

Letter Number: 605A00013133

*Certificate is Enclosed.*

RECEIVED  
MAR 30 AM 8:30  
DIV OF CORPORATIONS

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO**  
**APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

F01000001358

(Document number of corporation (if known))

1. BLACK TIE SERVICES, INC

(Name of corporation as it appears on the records of the Department of State)

2. ILLINOIS

(Incorporated under laws of)

3. 3-12-01

(Date authorized to do business in Florida)

FILED  
05 MAR 2005 PH 2:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 6/11/2004

5. BLACK TIE EVENT SERVICES, INC

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

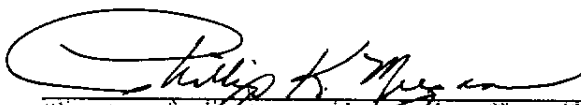
(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

\_\_\_\_\_  
(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

\_\_\_\_\_  
(New jurisdiction)



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

PHILLIP K. MEEGAN

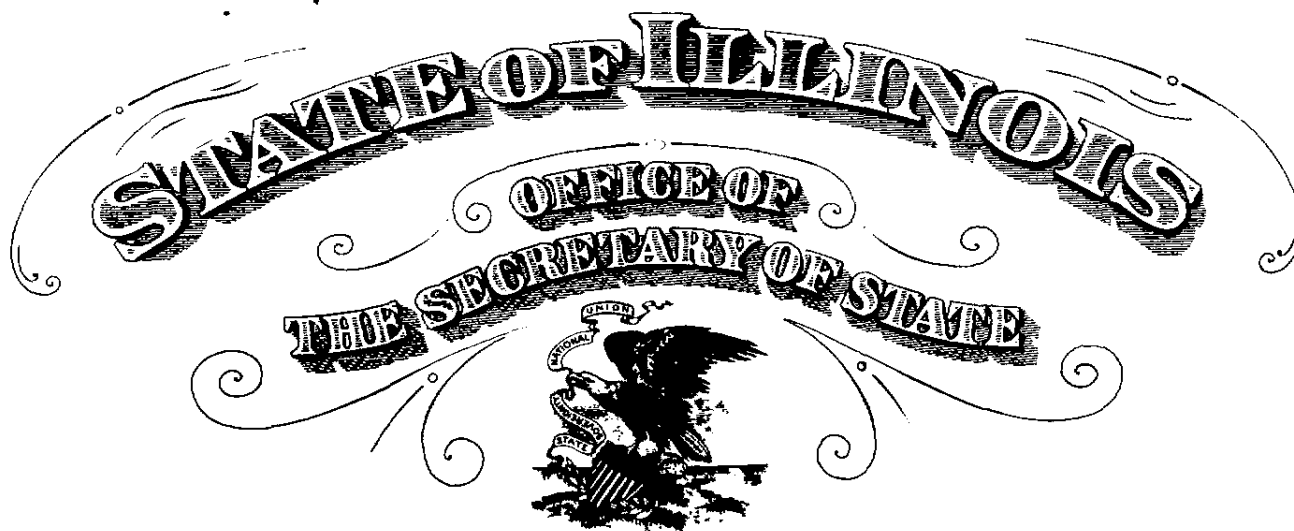
(Typed or printed name of person signing)

1/31/05

(Date)

PRESIDENT

(Title of person signing)



*To all to whom these Presents Shall Come, Greeting:*

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

BLACK TIE EVENT SERVICES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE JULY 09, 1998, (CORPORATE NAME CHANGED FROM BLACK TIE SERVICES, INC. ON JUNE 22, 2004,) APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND 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*

18TH  
day of MARCH A.D. 2005

*Jesse White*

SECRETARY OF STATE