# F02000001473

| IRANSIMI  | TALLETTER  |
|---|--|
| TO: Registration Section Division of Corporations   | 3/20 FOR CORP.   |
| SUBJECT: 10 East Corp.  |  |
| (Name of corpo  | oration - must include suffix)   |
| Dear Sir or Madam:  |  |
| The enclosed "Application by Foreign Corporation" Certificate of Existence", and check are submitte to transact business in Florida.                | 5000051361751 a for Auf -03/20/0201034001 d to regis *****78.75 ******78.75                        |
| Please return all correspondence concerning this n  | natter to the following:   |
| J. Michael Wilson   |  |
| (Nar  | ne of Person)  |
| 10 East Corp.   |  |
|   | n/Company)   |
| 1387 Cassat Avenue  |  |
| (.  | Address)   |
| Jacksonville, FL 32205  |  |
| · · · · · · · · · · · · · · · · · · ·   | ate and Zip code)  |
|   | 04 ) 220 3627  rea Code & Daytime Telephone Number)  |
| STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399 Enclosed is a check for the following amount: | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |
| ☐ \$70.00 Filing Fee  | ☐ \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy 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.

| l10 F  | ast Corp.  |                 |   |                  | _        |      |
|--|--|-----------------|---|------------------|----------|------|
|  |  |                 | D", "COMPANY", "CORPORATION" or   |                  |          |      |
|  | viations of like import in language a<br>or partnership if not so contained in |                 | indicate that it is a corporation instead of a                                    |                  |          |      |
| naturar person c   | or parmersurp if not so contained in   | me name at p    | lesent.)  |                  |          |      |
| 2. Delawar   | e .  | 3 04 3605253    |   |                  |          |      |
| (State or country under the law of which it is incorporated) (FEI number, if applicable) |  |                 | -   |                  |          |      |
| 4. Janua   | ry 25, 2002  | 5.              | Perpetual   |                  |          |      |
|  | (Date of incorporation) (Duration: Year corp. will cease to exist or "per      |                 | perpetual")   | -                |          |      |
| 6. Upon  | Qualification  |                 |   |                  |          |      |
|  |  | ation has not t | ransacted business in Florida, insert "upon qu                                    | alification.")   | -<br>)   |      |
| •  |  |                 | 607.1502 and 817.155, F.S.)   |                  |          |      |
| 7. 138 <b>7</b>  | Conneh Arrense Too   | l 7 .           | 5- DT 2220E   |                  |          |      |
| /- <u>130/</u>   | Cassat Avenue, Jac   | al office addre | :ss)  |                  | -        |      |
| Same   | Ç <b>X</b>   |                 |   |                  |          |      |
|  | (Current   | mailing addre   | ess)  |                  | -        |      |
|  |  |                 |   | I'A              | 0        |      |
| 8. C   | Computer and Web Se  | rvices          |   |                  | <u>ন</u> |      |
| ~  |  |                 | ntry to be carried out in state of Florida)                                       | <del>- 2</del> 7 | MAR 20   |      |
| ` •  | •  |                 | •   | AS.<br>TAS.      | N        | -;   |
| 9. Name and <u>str</u>   | reet address of Florida registe  | red agent: (    | P.O. Box or Mail Drop Box NOT accept  | able)∰≃          |          | LIFE |
| Name:  | J. Michael Wilso   | n               | ntry to be carried out in state of Florida)  P.O. Box or Mail Drop Box NOT accept | : F. C           |          | Ë    |
|  | 1207 0   |                 | <u> </u>  | .OR              | 1:50     |      |
| Office Address:  | 1387 Cassat Aven   | ue              |   |                  | 50       |      |
|  | Jacksonville   |                 | Florida 32205   | <i>ح</i> ث       |          |      |
|  | (City)   |                 | (Zip code)  |                  |          |      |
|  |  |                 |   |                  |          |      |

#### 10. 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.

(Registered agent's signature)

11. 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.

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

| A. DIREC       | TORS  |                   |                                       |                             |                  |
|----------------|---|-------------------|---------------------------------------|-----------------------------|------------------|
| Chairman: _    | Mr. Chris Baltes  | t                 | , <del>'</del> - <u>-</u>             | - 5                         | ; <del></del> -  |
|                | 650 Madison Avenue, 24th Floor  |                   |                                       |                             |                  |
|                | New York, NY 10022  |                   |                                       |                             |                  |
| Vice Chairma   | an:   |                   |                                       |                             |                  |
|                |   |                   |                                       |                             |                  |
| <del></del>    |   |                   |                                       |                             |                  |
| Director:      | Mr. John Waite  |                   |                                       |                             | <u></u>          |
| Address:       | 335 Eisenhower Lane South   | = 1               | -                                     | <u>- `</u> <del>;</del> }`` |                  |
|                | Kombard, IL 60148   |                   |                                       |                             | <u></u> -        |
| Director:      | Mr. Mark Baggio   |                   |                                       |                             |                  |
|                |   |                   | -                                     |                             |                  |
|                | 335 Eisenhower Lane South   |                   |                                       |                             |                  |
|                | Lombard, IL 60148   | <u></u>           | <u> </u>                              | <u> </u>                    | <u>.</u>         |
| B. OFFICE      | ·   |                   |                                       |                             |                  |
| President:     | MrJohn Waite  | <u>, , 40 - 1</u> | · · · · · · · · · · · · · · · · · · · |                             |                  |
| Address:       | 335 Eisenhower Lane South   | <u> </u>          |                                       |                             | <u> </u>         |
| ·              | Lombard, IL 60148   | . 1               | -                                     |                             | <b></b>          |
| Vice President | Mr. J. Michael Wilson   |                   |                                       |                             |                  |
|                | 1387 Cassat Avenue  |                   |                                       |                             |                  |
|                | Jakksonville, FL 32205  |                   |                                       |                             |                  |
| Secretary:     |   |                   |                                       |                             | _ · -            |
| Address:       |   |                   |                                       |                             | _ ÷              |
| Treasurer:     | Larry Boik  |                   |                                       |                             | <u>-</u>         |
|                | 335 Eisenhower Lane South Lombard, IL                                   |                   |                                       |                             | <u>-</u> ;       |
|                | Tombero, H  | <u>-60148</u> _   |                                       |                             | <del>-</del> ''- |
| NOTE: If no    | cessary, you may attach an addendum to the application listing addition | onal officers     | and/or direct                         | tors.                       |                  |
| 13             | Wichelan  | <u> 45 p</u>      | <u> </u>                              |                             | د با د           |
| C              | (Signature of Chairman, Vice Chairman, or any officer listed in nu      | mber 12 of t      | he application                        | n)                          |                  |
| 14. <u>J.</u>  | Michael Wilson, Vice President  | - <u>.</u>        |                                       | <u> </u>                    | _, , , , ,       |
|                | (Typed or printed name and capacity of person signing app               | ucation)          |                                       |                             |                  |

## Delaware

PAGE 1

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "10 EAST CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF MARCH, A.D. 2002.



Darriet Smith Windson Secretary of State

AUTHENTICATION: 1663734

DATE: 03-13-02

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