F0300002434

| (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: |
| MeClin term GAVE AUTHORIZATION BY PHONE TO |
| COTRECT Suffix by adding INC BATE 5/14/03 @ 4:31 pm |
| DOC. EXAM G. BLG |

Office Use Only



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TRANSMITTAL LETTER

| TO: | Registration Sec Division of Corp | | | ,77 | |
|-------------------------------|---|------------------------------|----------------|--|--|
| SUBJ | ECT: | OBA MIDWEST, | LTD. | _ | |
| | | (Name | of corpora | tion - must include suffix) | |
| Dear S | ir or Madam: | | | . <u>.</u> | |
| "Certif | | e", and check are s | | or Authorization to Transact to register the above reference | |
| Please | return all corresp | ondence concernir | ng this mat | iter to the following: | |
| Melv | vin J. Fein | | | | 9 8 |
| | vin J. Fein, | P.C. | (Name | of Person) | 产金 五十 |
| 1155 | 5 S. Washing | ton St., Ste. | (Firm/(204 | Company) | SEE ROATION |
| | · · · · · · · · · · · · · · · · · · · | | (Âc | idress) | Ser S |
| Nape | erville, IL | 60540 | | | 100 mg |
| | | | (City/Stat | te and Zip code) | |
| For fur | ther information | concerning this ma | utter, pleas | e call: | |
| Mel | vin J. Fein | \$ | at (630 | _ ₁ 983~5255 | |
| | (Name of Perso | | (Are | 983-5255 a Code & Daytime Telepho | ne Number) |
| | | | | 77 | |
| Regista Division 409 E. | ET ADDRESS: ration Section on of Corporation Gaines St. assee, FL 32399 | s | | MAILING ADDRESS Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314 | us |
| Enclos | ed is a check for | the following amo | unt: | £ | |
| ₽ \$70 | .00 Filing Fee | S78.75 Filing Certificate of | | \$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.

| Illinois | | 3 | 36-3170149 | ې <u>د</u> و | THE THE PARTY OF T |
|--|--|--|---------------------------|---------------------|--|
| State or country unde | er the law of which it is incorporated) | | (FEI number, if | applicable) | |
| 03/16/82 | | 5. <u> </u> | perpetual | | 1500 |
| (Date of i | ncorporation) | | tion: Year corp. will cea | se to exist or "per | petua(1) |
| 04-09- | 03 | . ~~ | | | 5, |
| . | business in Florida. If corporation hat (SEE SECTIONS 607) | 1501, 607.1 | | | , |
| 8160 C C | and Arra Daredon II 60 | 1527 | _ | | |
| 8160 S. C. | ass Ave., Darien, IL, 60 | | · | | |
| | (Principal office | address) | | hay san | |
| | (Principal office n J. Fein, 1155 S. Washi | address) ngton_S | ., Ste. 204, Na | perville, II | 60540 |
| | (Principal office | address) ngton_S | ., Ste. 204, Na | perville, II | . 60540 |
| c/o Melvi | (Principal office a J. Fein, 1155 S. Washi (Current mailing | address) ngton_S | ., Ste. 204, Na | perville, II | 60540 |
| c/o Melvin | (Principal office n J. Fein, 1155 S. Washi | e address) ngton S g address) | | | 4 60549 |
| c/o Melvin | (Principal office of J. Fein, 1155 S. Washing (Current mailing ned Exhibit "A" corporation authorized in home state | e address) ngton S address) or country t | be carried out in state o | f Florida) | |
| c/o Melvin | (Principal office n J. Fein, 1155 S. Washi (Current mailing ned Exhibit "A" | e address) ngton S address) or country t | be carried out in state o | f Florida) | |
| c/o Melvin | (Principal office of J. Fein, 1155 S. Washing (Current mailing ned Exhibit "A" corporation authorized in home state | e address) ngton S address) or country t | be carried out in state o | f Florida) | |
| c/o Melvin see attacl (Purpose(s) of Name and street a | (Principal office of the principal office of J. Fein, 1155 S. Washing (Current mailing of the principal of t | e address) ngton S g address) or country tent: (P.O. | be carried out in state o | f Florida) | |
| c/o Melvin see attacl (Purpose(s) of Name and street a Name: CT | (Principal office a J. Fein, 1155 S. Washi (Current mailing ned Exhibit "A" corporation authorized in home state address of Florida registered ag Corporation System | e address) ngton S address) or country t ent: (P.O. | be carried out in state o | f Florida) | |

further agree to comply with the provisions of all statutes relative to the proper and complet duties, and I am familiar with and accept the obligations of my position as registered agent.

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. DIRECTORS Chairman: ___ Vice Chairman: Director: ___JAMES V. GALLERY Address: 8160 S. Cass Ave., Darien, IL 60561 Director: ___THOMAS M. OTSTOTT. JR.___ Address: 8160 S. Cass Ave., Darien, IL 60561 **B. OFFICERS** President: JAMES V. GALLERY Address: 8160 S. Cass Ave. Darien, IL 60561 Address: 8160 S. Cass Ave. Darien, IL 60561 Secretary: THOMAS M. OTSTOTT, JR. Address: 8160 S. Cass Ave., Darien, IL 6056I Treasurer: THOMAS M. OTSTOTT, JR. Address: 8160 S. Cass Ave., Darien, IL 60561 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) THOMAS M. OTSTOTT, JR., C.E.O.

(Typed or printed name and capacity of person signing application)

EXHIBIT "A"

- 1) To broker, administer employee benefit, pensions, profit sharing plans, health and welfare plans and vacation funds as well as corporate insurance plans and to provide in connection therewith the management, data/computer processing and actuarial services. However, the corporation will not compromise, settle or adjust claims of any kind.
- 2) To own, buy, sell, lease all manner of property, real and personal and to deal therein in every manner whatsoever.
- 3) To borrow, loan and invest all manner of securities and monies.
- 4) To deal in all manner of goods and services and the manufacture and sale thereof.





To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do

hereby certify that

OBA MIDWEST, LTD., A DOMESTIC CORPORATION,
INCORPORATED UNDER THE LAWS OF THIS STATE MARCH 16, 1982, 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

day of

MAY

A.D. 2003

Desse White