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TRANSMITTAL LETTER

TO:	Registration Sec Division of Corp				-	
SUBJ	ECT:	Quiekdi	ner	, Inc.		
		(Name of corpo	ration -	must include suffix)		
Dear S	Sir or Madam:	·			-	
"Certi:		on by Foreign Corporation," and check are submitted ida.				
Please	return all correspo	ondence concerning this ma	atter to t	he following:		
		Jose	b .	CARDENA	<u> </u>	
		(Nam	ie of Pei	rson)		
		Qui	eko,	NERD , IN) C.	ganingan of a
		(Firm	ı/Compa	iny)		
		2829	ω.	Cermak	Rd.	Lat Migratio 47
		(1	Address)		
		CHi CAB	0, 3	<i>EL</i> . 6063 Zip code)	۶>	型器 2
		(City/St	ate and	Zip code)		E E
		concerning this matter, plea		047_99	97	-7 PM 3: 3! [ART OF STATE HASSEE, FLORE
<u>ه ب</u>	(Name of Perso	at (T	rea Cod	e & Daytime Teleph	one Number)	NDA 36
	STREET ADD Registration Sec Division of Corp 409 E. Gaines S Tallahassee, FL	ction corations t.		MAILING Al Registration S Division of Co P.O. Box 632 Tallahassee, F	Section orporations 7	
Enclos	sed is a check for t	he following amount:				
\$70	0.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status		8.75 Filing Fee & ertified Copy		Filing Fee, cate of Status & ed 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.

1.	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
	(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.	TLLINGIS 36-4437392 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4.	(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
4	
6.	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7.	2829 W. Cermak Rd.
•	
	CHicA Go, IL. 60623
	(Current mailing address)
8.	Money Transmitter
	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
	Name: SANTA CATARINA
Ο.	Name: SANTA CATARINA ffice Address: 5808 Augustine PD. Jack sonville , Florida 32207 (City) (Zip code) Registered agent's acceptance:
	Jacksonville Florida 32207 The Dim
	(City) (Zip code)
	Registered agent's acceptance: aving been named as registered agent and to accept service of process for the above stated corporation at the place
de fu	rignated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I rther 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. DIRECTORS		
Chairman:	George A. CARDENAS	
Address:	2107 S. Marshall Blud.	
	CHICAGO, IL. 60623	
Vice Chairman:	Jose D. CARDENAS	
Address:	4531 N. LAWNDALE	
	CHICAGO, IL. 60625	
Director:	The second secon	<u> </u>
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Director:		
	The second secon	<u></u> .
-		
B. OFFICERS		
President:	George A. CARDENAS	
Address:	2107 S. MARSHALL BIVD.	
	ctica60, IL. 60623	
Vice President:	Jose D. CARDENAS	
Address:	(157) AC / A / C	
	CHICAGO, IL. 60625	
Secretary:	Jose D. CARDENAS	
Address:		
Treasurer:	<u> </u>	
Address:	Dr S	_
NOTE: If necessa	ary, you may attach an addendum to the application listing additional officers and/or directors.	
13	(Signature of Director or Officer listed in number 12 of the application)	—
14.	Josep. CARDENAS Vice-President	
±-T•	(Typed or printed name and capacity of person signing application)	_

File Number

6160-363-8



To all to whom these Presents Shall Come, Greeting:

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

hereby certify that



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this

24TH

day of

MAY

A.D.

2004

Desse White

SECRETARY OF STATE