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PICK-UP	WAIT MAIL
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Certified Copies	Certificates of Status
Special Instructions to Filir	ng Officer:
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Office Use Only



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TRANSMITTAL LETTER

TO:	Registration Sec Division of Cor						
SUBJ	ECT:	Bus	INESS	P	ROTECTION	cyl c	C
		(Name of corpo	ration	- must include suffix)		
Dear S	ir or Madam:						
"Certif	• • •	e", and chec			authorization to Transa gister the above refere		•
Please	return all corresp	ondence cor	ncerning this ma	atter 1	to the following:		
:	1. Dilling	u. F.	Morisi				28
	William		(Nam	e of I	Person)		皇昌一
	Busin	ごら り	PROTE	7	100 IPC		影后
;					ipany)		200
ક	0337 1)ALEI	1000	R	N #SUIRE	101	TOR :
			(A	ddre	SS) #SUITE		FLORIDO 1: 35
N.	FT MY	ers.	FLOR	(DA	33917		P-\$5
			(City/St	ate ar	33917 nd Zip code)		
•							
For fur	ther information	concerning t	his matter, plea	ise ca	n:		
المحدا	iam F. M	ST131					
Jo A	ma S. Mar	[213	at (815	<u> </u>	122-9279	123	9-731-6749 lber)
•	(Name of Perso	on)	(Aı	rea C	ode & Daytime Teleph	ióne Num	iber)
Registr Divisio 409 E.	ET ADDRESS: ration Section on of Corporation Gaines St. assee, FL 32399	s			MAILING ADDRES Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 3231	ons	
Enclose	ed is a check for	the followin	g amount:		1		
z z \$70.	.00 Filing Fee		Filing Fee & cate of Status	-	\$78.75 Filing Fee & Certified Copy	Ce	7.50 Filing Fee, ertificate of Status & ertified 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.

(Enter name of c	USINESS corporation; must include corp," "Inc," "Co," or "C	"INCORPORATEI	o," "COMPANY,	" "CORPORATION,"	siness in Provida
inc., co., c	orp, me, co, or c	orp.)			THE SECOND
					(A. 2)
(If name unavail	able in Florida, enter alte	ernate corporate nam	e adopted for the	ourpose of transacting bus	siness in Plorida
2. 11-			į		
(State or country	under the law of which i	it is incorporated)		(FEI number, if applicabl	e) 70
1. NOV	14, 1980		5 .	PERPETUAL ar corp. will cease to exis	
(Date	of incorporation)		(Duration: Ye	ar corp. will cease to exis	t or "perpetual")
6.	PEND:	N6			
	•	t transacted business NS 607.1501 & 607		r to registration) rmine penalty liability)	
7 2033	7 DALEWO	09 600	Suite #	101 N. FT MY	1003 FL 3391
1		(Principal office ac	idress)		
103 Au	TUMPLOO	(Current mailing as	DAUSTU	incom? IF	61070
		(ouron maring a			
. ಗಲ್	ETIVE A	10 C1	Secur	ed out of state of Florida)	icy.
(Purpose(s	i) of corporation authori	zed in home state or	country to be carri	ed out thistate of Florida)	V
9. Name and stree	et address of Florida r	egistered agent: (I	P.O. Box <u>NOT</u> a	cceptable)	
Name:	Lolliam	F. MOTIS	<u> </u>		
•	LOSSIT DAL	09 dooces	Suite	1101	
Office Address:			. Florida	33917	
Office Address:	N. FT. MY	E 12 3			
Office Address:	N. FT. MY	City)	, , <u>, , , , , , , , , , , , , , , </u>	(Zip code)	

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.

"OFFICIAL SEAL"
Christy Dupont
Notary Public, State of Illinois
My Commission Exp. 101/22/2008

(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: JO ANN S. MOTISI Address: 103 AUTUMPWOOD LY DAVIS JUPCTION, IL 61020 Vice Chairman: Lasilina F. Marisi Address: 103 AUTUMPWOOD LN DAVIS JUNCTION, IL 61020 Director: Address: B. OFFICERS President: Wotist Address: 103 AUTUMNWOOD IN DAVIS TUNCTION, IL 61020 Vice President: Jo App S. Morisi Address: 103 AUTUMNWOOD LA DRUS JUNCTION, IL 61020 Secretary: Jo Apro S. MOTISI Address: 103 AUTUMPWOOD HO DAVIS JUMMODON 11 61020 Treasurer: JO ALL S. MOTISI Address: 103 AUTUMPWOOD FO DAVIS JUNCTOD, IL 61020 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Director or Officer listed in number 12 of the application) (Typed or printed name and capacity of person signing application)



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

day of

DECEMBER

A.D.

2004

Desse White