

F05000001177

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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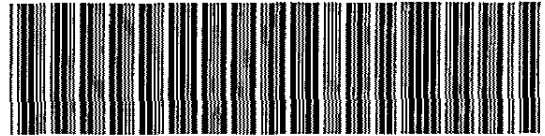
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/25/05--01001--003 **70.00

RECEIVED
05 FEB 24 PM 3:37
DIVISION OF CORPORATION

FILED
2005 FEB 24 AM 8:50
TALLAHASSEE, FLORIDA

J. BRYAN FEB 25 2005

CT CORPORATION

February 24, 2005

Department of State, Florida
409 East Gaines Street
Tallahassee FL 32399

FILED
2005 FEB 24 AM 8:50
DEPARTMENT OF CORPORATIONS
TALLAHASSEE, FLORIDA

Re: Order #: 6306742 SO
Customer Reference 1: 2912002-178
Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

Empire Partner, Inc. (DE)
Qualification
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell
Fulfillment Specialist
Ashley_Mitchell@cch-lis.com

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

**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. Empire Partner, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- Nortrax-Southeast, Inc.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. 36-4485436
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. May 3, 2001 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. upon acceptance of application
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 2020 52nd Ave., Moline, IL 61265
(Principal office address)
- 2020 52nd Ave., Moline, IL 61265
(Current mailing address)
- To engage in any lawful act or activity for which corporations may be organized under the General Corporation Law of
8. Delaware and permitted under the laws of the State of Florida.
(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: C T Corporation System
- Office Address: 1200 South Pine Island Road
- Plantation, Florida 33324
(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.

C T Corporation System

By: Lauren Greco **Lauren Greco**
(Registered agent's signature) **Assistant Secretary**

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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: James A. Earnshaw (Sole Director)

Address: 2020 52nd Ave., Moline, IL 61265

Director: _____

Address: _____

B. OFFICERS

President: James A. Earnshaw

Address: 2020 52nd Avenue

Moline, IL 61265

Vice President: Jeffery W. Bloom

Address: 2020 52nd Ave., Moline, IL 61265

Secretary: Jeffery W. Bloom (above)

Address: 2020 52nd Ave., Moline, IL 61265

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. X Jeffery W. Bloom
(Signature of Director or Officer listed in number 12 of the application)

14. Jeffery W. Bloom, Vice President
(Typed or printed name and capacity of person signing application)

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2005 FEB 24 AM 8:20
CLERK OF SUPERIOR COURT
JACKSONVILLE, FLORIDA

**Addendum to Application by Foreign Corporation for Authorization to
Transact Business in Florida**

Listing of Additional Officers and/ or directors of Empire Partner, Inc.

Assistant Secretary: Thomas K. Jarrett, 2020 52nd Avenue, Moline, IL 61265
Assistant Treasurer: Michael J. Mack, Jr., 2020 52nd Avenue, Moline, IL 61265

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TALLAHASSEE, FLORIDA

Delaware

PAGE 1

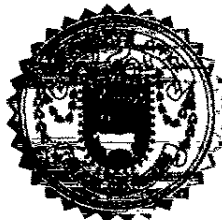
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EMPIRE PARTNER, INC." 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 TWENTY-THIRD DAY OF FEBRUARY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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2005 FEB 24 AM 8:50
DEPARTMENT OF REVENUE
TALLAHASSEE, FLORIDA



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

3385312 8300

AUTHENTICATION: 3699678

050147533

DATE: 02-23-05