TUS0000003089

| (Requestor's Name) |
|---|
| |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
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| |

Office Use Only



700050365237

04/15/05--01047--012 **35.00

05/23/05--01025--001 **35.00

THE SECRETARY OF SECULAR SECUL

75 3089 (D) 3089

MEMO

Date: 5/4/2005

To: Florida Department of State

From: Employer's Consortium V, Inc.

RE: Ref: W05000020002

I have received your correspondence with the reference number as stated above and I disagree with your findings. Please see the attached check made payable to the Florida Department of State and also the bank statement that shows the check has cleared our account. Please review your records to find that we have paid the necessary filing fee and process our application accordingly. If you have any questions/comments please give me a call at 630 629 2229. I appreciate your help in this matter.

Rachael Zdanek

SECRETARY OF STORE



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 9, 2005

ECI 151 EAST 22ND STREET LOMBARD, IL 60148

SUBJECT: EMPLOYER'S CONSORTIUM V, INC.

Ref. Number: W05000020002

We have received your document for EMPLOYER'S CONSORTIUM V, INC. and check(s) totaling \$35.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$35.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

CORPORATIONS BASIC FEES

Profit and NonProfit Florida & Foreign Corp.

| Filing Fees | \$35.00 |
|------------------------------|---------|
| Registered Agent | \$35.00 |
| Designation Certifed Copy | \$8.75 |
| Certiled Copy | 90.7 S |

Certified Copy of any record \$8.75 plus a \$1 per pageover 8 pages not to exceed \$52.50

Reinstatement
Profit corp. \$600.00
Non Profit Corps. \$175.00
Annual Report/Uniform Business Report \$61.25
plus Supplemental Fee of \$88.75 (profits only)

| Articles of Correction | \$35.00 |
|---------------------------|---------|
| Revocation of Dissolution | \$35.00 |
| Dissolution & Withdrawal | \$35.00 |
| Amendment of any record | \$35.00 |

| Certificate of Status | \$ 8.75 \$87,50 |
|--|------------------------|
| Foreign Name Registration Foreign Name Renewal | \$87.50 \$87.50 |
| Merger | \$35.00 for each party |
| Substitute Service of process | φοσίου τοι σασίτ βαίτη |
| (Chapter 48) | \$8.75 |
| Registered Agent Change | \$35.00 |
| Registered Agent Resignations | |
| Active Corporations | \$87.50 |
| Inactive Corporations | \$35.00 |
| Resignation of Officer/Director | \$35.00 |
| Trade & Service Marks | \$87.50 per class |
| Trade & Service Marks Renewals | \$87.50 per class |
| Trade & Service Mark Assignments | \$50.00 |

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 805A00027184





FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

April 20, 2005

ECI 151 EAST 22ND STREET LOMBARD, IL 60148

SUBJECT: EMPLOYER'S CONSORTIUM V, INC.

Ref. Number: W05000020002

We have received your document for EMPLOYER'S CONSORTIUM V, INC. and check(s) totaling \$35.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$35.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

CORPORATIONS BASIC FEES

Profit and NonProfit Florida & Foreign Corp.

| Filing Fees | \$35.00 |
|------------------|---------|
| Registered Agent | |
| Designation | \$35.00 |
| Certifed Copy | \$8.75 |

Certified Copy of any record \$8.75 plus a \$1 per pageover 8 pages not to exceed \$52.50

Reinstatement
Profit corp. \$600.00
Non Profit Corps. \$175.00
Annual Report/Uniform Business Report \$61.25
plus Supplemental Fee of \$88.75 (profits only)

| Articles of Correction | \$35.00 |
|---------------------------|---------|
| Revocation of Dissolution | \$35.00 |
| Dissolution & Withdrawal | \$35.00 |
| Amendment of any record | \$35.00 |

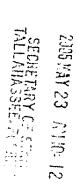
| Certificate of Status Foreign Name Registration | \$ 8.75 \$87.50 |
|---|------------------------|
| Foreign Name Renewal | \$87.50 |
| Merger | \$35.00 for each party |
| Substitute Service of process | • |
| (Chapter 48) | \$8.7 5 |
| Registered Agent Change | \$35.00 |
| Registered Agent Resignations | |
| Active Corporations | \$87.50 |
| Inactive Corporations | \$35.00 |
| Resignation of Officer/Director | \$35.00 |
| Trade & Service Marks | \$87.50 per class |
| Trade & Service Marks Renewals | \$87.50 per class |
| Trade & Service Mark Assignments | \$50.00 |

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 805A00027184



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. | Employer's Consortium V, Inc. |
|----|---|
| | (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. | II, 3 81 -0585043 |
| ۷. | (State or country under the law of which it is incorporated) 3. 81 -0585043 (FEI number, if applicable) |
| 4 | 2/3/03 Pers should |
| ., | (Date of incorporation) 5. Perpetual (Duration: Year corp. will cease to exist or "perpetual") |
| 6. | 1/1/05 |
| | (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") |
| | (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) |
| 7. | 151 East 2219 Street Lombard 1L 60148 |
| | (Principal office address) |
| | Same as above |
| | (Current mailing address) |
| 0 | Payroll Services FB B |
| 8. | Payroll Services (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) |
| 0 | Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) |
| Э. | mo - Fi |
| | Name: Business Filings Incorporated |
| Ωf | ffice Address: 660 East Jefferson Street |
| 0, | |
| | Tallahassee , Florida 32301 |
| | (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 signated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I |
| fu | rther agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties |
| an | nd I am familiar with and accept the obligations of my position as registered agent. |
| | (1/1) |
| | |
| | (Registed/agent's signature) |
| | Business Filings Incorporated, Mark Schiff, AVP |
| 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: | |
| Address: | |
| | |
| Director: | |
| Address: | |
| | · |
| B. OFFICERS | • |
| President: ANDREW C. CORY | |
| Address: 151 East 2200 Street | |
| Lombard 1L 60148 | |
| Vice President: | <u></u> |
| Address: | 25 Z |
| | m |
| Secretary: | |
| Address: | 75 |
| Treasurer: | |
| Address: | |
| | v 500 |
| NOTE: If necessary, you may attach an addendum to the application listing additional off | icers and/or directors. |
| 13. (Signature of Director or Officer listed in number 12 of the application) | |
| AUDIONI A COOK / PORCEDO TO | |
| (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

APRIL

A.D.

2005

Desse White