# F05000004242

(Rec	questor's Name)	
(Add	iress)	
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(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	filing Officer:	
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Office Use Only



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07/19/05--0104n--010 \*\*70.00

#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: Joint Active Sustems Inc. (Name of corporation) must include suffix)
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida." "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Denn Kremer
(Name of Person)
Joint Active Systems, Inc
alos S. Roney
(Address)
City/State and Zip code)
(City/State and Zip code)
For further information concerning this matter, please call:
erri Millard = 518, 766-CICH
(Name of Person) (Area Code & Daytime Telephone Number)
STREET ADDRESS:  Registration Section  Division of Corporations  409 E. Gaines St.  Tallahassee, FL 32399  MAILING ADDRESS:  Registration Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee

#### APPLICATION BY FOREIGN COMPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IU	Isole in Florida, enter alte	3,	pted for the purpose of transact 30-41935 (FEI number, if ap	54
16	1127 195		PERPETUR	_
(Date	of incorporation)		uration: Year corp. will cease	
IX)C	utina o	n Licer	se	
			orida, if prior to registration) F.S., to determine penalty liab	iina
27	$\sim$ $\sim$ $\sim$ $\sim$ $\sim$ $\sim$ $\sim$ $\sim$	2007.1302 (007.1302,	00.	11 / 2016
	<u> </u>	(Principal office address)	t tingham	p. L.C. Coach
00	BOX 1360	7 ECCIV	naham 7	1/1240
<u> </u>		(Current mailing address)	<del>19/10/1</del>	<u>-                                    </u>
١ .	100 a d 1	1 (	- Deside	3 ·C
1000 S	Medica	<u>Lequipm</u>	ent Provide y to be carried out in state of F	
· -	-			S
e and street	t address of Florida reg	gistered agent: (P.O. Bo	ox NOT acceptable)	
Name:	DEAN KR	EMEK	<del>-</del>	, 
\ddress:	420 E.	Governm	ent St.	<b></b>
	00,050,00			
	(C	ity)	Florida 3250 (Zip codc)	<u>ښ</u> ښ
	( <del>-</del>			

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: <u>Veter Bonutti</u>	<del>-</del> ,
Address: 1303 W. Evergreen	<b></b>
Effingham, Il 62401	_
Vice Chairman: Boris Bonutti	-
Address: 1303 W. Evergreen	•
Effinaham, IL bayol	•
Doo - Kronor	-
	-
	•
Effingham, PL 62401	•.
Director:	
Address:	
S 5	S S S
B. OFFICERS	위 근
President: Dean Kremer - 9 9	27E
Address: 1303 W. Everareen ==	်င္က က
Effinaham, IL 62401	Ä
0012-02	300
Address: 1303 W. EUPRATEEN	•
	,
Effingham, JIC (02401	
Secretary: 1507 5 DONUTTI	- 2116
Address: 1303 W. Evergreen Effingham, Il U	<b>244</b> 0
Treasurer. Dean hremen	
Address: 1303 W. Evergreen Effingham, IL Vi	1971
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.	
13. Jean 1	
(Signature of Director or Officer listed in number 12 of the application)	
14 Illan hremer	



### 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

JULY

A.D.

2005

Desse White

SECRETARY OF STATE