

F05000004951

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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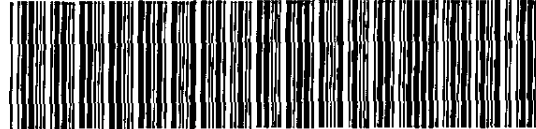
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Acknowledgment

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W. P. Veriier

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TALLAHASSEE, FLORIDA

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Ra. Signature

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Convey or Store It, 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:

Lawrence J. Kimmel, CPA
(Name of Person)

Lawrence J. Kimmel, PC
(Firm/Company)

2020 Dean St., Unit K
(Address)

St. Charles, IL 60174
(City/State and Zip code)

For further information concerning this matter, please call:

Lawrence J. Kimmel, CPA at (630) 587-5802
(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 ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 22, 2005

LAWRENCE J. KIMMEL, CPA
LAWRENCE J. KIMMEL, PC
2020 DEAN ST., UNIT K
ST CHARLES, IL 60174

SUBJECT: CONVEY OR STORE IT, INC.
Ref. Number: W05000030658

We have received your document for CONVEY OR STORE IT, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6913.

Diane Cushing
Document Specialist

Letter Number: 505A00042715



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

August 9, 2005

LAWRENCE J. KIMMEL, CPA
LAWRENCE J. KIMMEL, PC
2020 DEAN ST., UNIT K
ST CHARLES, IL 60174

SUBJECT: CONVEY OR STORE IT, INC.
Ref. Number: W05000030658

We have received your document for CONVEY OR STORE IT, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The registered agent must sign accepting the designation.

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) 245-6913.

Diane Cushing
Document Specialist

Letter Number: 505A00051047

**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. Convey or Store It, 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. Illinois 3. 41-2096961
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 05/13/2003 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 04/15/05
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 205 Poplar Place, North Aurora, IL 60542
(Principal office address)

205 Poplar Place, North Aurora, IL 60542
(Current mailing address)

8. Sale and service of conveyor systems
(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: Constantine Konstans

Office Address: 2090 Matecumbe Key Rd. #1101

Punta Gorda, FL 33955, Florida
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.

ⓧ 
(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: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Daniel Ross

Address: 205 Poplar Place

North Aurora, IL 60542

Vice President: Daniel Ross

Address: 205 Poplar Place

North Aurora, IL 60542

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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TALLAHASSEE, FLORIDA

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

13. (S) [Signature]

(Signature of Director or Officer listed in number 12 of the application)

14. Daniel Ross, President

(Typed or printed name and capacity of person signing application)

File Number

6285-841-9



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

CONVEY OR STORE IT, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE MAY 19, 2003, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS*****

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SECRETARY OF STATE
SPRINGFIELD, ILLINOIS

In Testimony Whereof, There to set

my hand and cause to be affixed the Great Seal of the State of Illinois, this

day of

JULY

A.D.

11TH

2005



Jesse White

SECRETARY OF STATE