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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

W05-46396
J. BRYAN OCT 7 2005

J. BRYAN OCT 17 2005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CHI Overhead Doors, 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:

Patrick J. Knoll

(Name of Person)

CHI Overhead Doors Inc.

(Firm/Company)

1485 Sunrise Dr.

(Address)

Arthur, IL 61911

(City/State and Zip code)

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For further information concerning this matter, please call:

Tisha Pfeiffer

(Name of Person)

at (217) 543-2135

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

**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. CHI Overhead Doors, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Ltd.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. IL.

(State or country under the law of which it is incorporated)

3. 37-1307264

(FEI number, if applicable)

4. 3/25/93

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 9/29/05

(Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 1485 Sunrise Dr. Arthur, IL. 61911

(Principal office address)

P.O. Box 260 Arthur, IL. 61911

(Current mailing address)

8. We deliver garage doors manufactured in our plant in IL. by co. owned trucks
(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)

to dealers located in FL.

Name:

CT Corporation System

Office Address:

1200 S. Pine Island Rd.

Plantation

(City)

Florida

33324

(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.

Christine Eastwine, Asst. Secy

(Registered agent's signature)

Christine Eastwine, Asst. Secy

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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: See attached

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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B. OFFICERS

President: See attached

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Patrick J. Knoll
(Signature of Director or Officer listed in number 12 of the application)

14. Patrick J. Knoll, CFO
(Typed or printed name and capacity of person signing application)

CHI Overhead Doors Inc

Directors

Alexander R. Castaldi
Ramsey A. Frank
Paul S. Levy
Brett N. Milgrim
James L. Overholt

JLL Partners	450 Lexington Ave, Suite 3350 New York, NY 10017
JLL Partners	450 Lexington Ave, Suite 3350 New York, NY 10017
JLL Partners	450 Lexington Ave, Suite 3350 New York, NY 10017
JLL Partners	450 Lexington Ave, Suite 3350 New York, NY 10017
CHI Overhead Doors	1485 Sunrise Dr., Arthur, IL, 61911

Officers

James Overholt
Brett N. Milgrim
Michael C. Chang
Patrick J. Knoll

President	1485 Sunrise Dr., Arthur, IL, 61911
Vice President	450 Lexington Ave, Suite 3350 New York, NY 10017
Secretary/Treasurer	450 Lexington Ave, Suite 3350 New York, NY 10017
Chief Financial Officer	1485 Sunrise Dr., Arthur, IL, 61911

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File Number

5723-815-1



To all to whom these Presents Shall Come, Greeting:

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

C. H. I. OVERHEAD DOORS, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE MARCH 25, 1993, 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*****



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this
day of SEPTEMBER A.D. 2004

Jesse White

SECRETARY OF STATE