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(Re	questor's Name)	
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2006 SEP 13 PM 2: 48
SECRETARY OF STATE
TALLAHASSEE, FI ORIDA

7. Suren SEP 14 2008

## **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: MetroGroup Marketing Services, 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:
Chriss Springer
(Name of Person)
MetroGroup Marketing Services, Inc.
(Firm/Company)
901 West Bond Street
(Address) Lincoln, NE 68521
(City/State and Zip code)
For further information concerning this matter, please call:
Robert Svoboda <sub>at (</sub> 402 <sub>)</sub> 323-3548
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:  New Filing Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301  MAILING ADDRESS:  New Filing 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 & \$78.75 Filing Fee & \$87.50 Filing Fee, Certificate of Status Certified Copy Certified Copy 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	Metro Group Marketing Services, Inc.	2006	
	(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")		
	me, co, corp, me, co, or corp.)	SEP	<u> </u>
	SSE SE	ဩ	
	(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)	P	E
_		.; ≖	
2	NCOPASIZA  3. ZG-01367   SP   (State or country under the law of which it is incorporated) (FEI number, if applicable)	 63-1-	
	Decomber 27 2005 Permet 10/	œ	
4.	(Date of incorporation) 5 (Duration: Year corp. will cease to exist or "perpetual")		
_			
6.	(Date first transacted business in Florida, if prior to registration)		
	(SEE SECTIONS 607 1501 & 607.1502, F.S., to determine penalty liability)		
7.	901 West Bond Street, Lincoln, NE 69521		
	(Principal office address)		
	901 West Bond Street, Lincoln, NE 68521		
	(Current mailing address)		
	English and laught and a sit a D. Jane	4.4	
8	(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	vgu	11 Ze
9.	Name and street address of Florida registered agent: (P.O. Box NOT acceptable)		
	Name: NRAI Services, Inc.		
Ω.	ffice Address: 2731 Executive Park Dr., Ste 4		
Ų.			
	Weston , Florida 33331		
	(City) (Zip code)		
10	Registered agent's acceptance:		
$H_{\epsilon}$	aving been named as registered agent and to accept service of process for the above stated corporation at the place		

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:

	RECTORS			
Chairma	<sub>n:</sub> Jim McQuaid	<del>-</del>	2	
Address:	1033 Skokie Blvd., Suite 600			
	Northbrook, IL 60062	HAS	SEP 1	<b>T</b>
Vice Cha	airman:	SEE,F	ယ	
Address:			<u> </u>	
		<u>Smi</u>	<del>0</del>	_
	Steven Taslitz	<u> </u>		
Address:	1033 Skokie Blvd., Suite 600			_
	Northbrook, IL 60062	<del></del>		
Director:		<del> </del>		_
Address:				
B. OFF	FICERS			
President	Robert Logan			
	901 West Bond Street			
	Lincoln, NE 68521-3694			_
Vice Pre	sident: Merrick Elfman			
Address:	4000 Olaskia Divid. Ovita 000			_
	Northbrook, IL 60062			
Secretary	Shoshana Vernick			
	1033 Skokie Blvd., Suite 600, Northbrook, IL 60062			
	Ken Garvey			_
	901 West Bond Street, Lincoln, NE 68521-3694			
	If necessary, you may attach an addendum to the application listing additional officers and/or di	irectors.		
13. <u> </u>	(Signature of Director or Officer listed in number 12 of the application)			
1/-	• •			
14. <u><b>N</b>E</u>	(Typed or printed name and capacity of person signing application)			
	(-) Lan an Lamina wine askaring of barrons arbusing abbusances)			

STATE OF



**NEBRASKA** 

2006 SEP 13 PN 2: L SECRETARY OF STATI 2-TALLANASSEE, FLORIG

Department of State
Lincoln, Nebraska

United States of America, State of Nebraska

I, John A. Gale, Secretary of State of Nebraska do hereby certify;

BEFORE

ETROGRÔUP MARKETING SERVICES, INC

was duly incorporated under the laws of this state on December 27, 2005 and do further centify that no occupation taxes assessed are unpaid and no biennial reports are delinquent; articles of dissolution have not been filed and said corporation is in existence as of the date of this certificate.

In Testimony Whereof,

ARCH 151 18

Ahave hereunto set my hand and affixed the Great Seal of the State of Nebraska on August 10, 2006.

SECRETARY OF STATE

This certificate is not to be construed as an endorsement, recommendation, or notice of approval of the entity's financial condition or business activities and practices.