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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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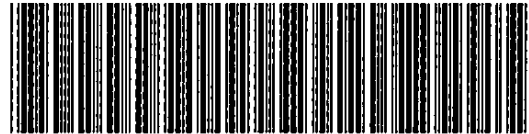
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

for 9/21/06

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TO: New Filing Section
Division of Corporations

06 SEP 21 PM 4:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Versatile Processing Group, 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:

Melissa M. Harakas

(Name of Person)

Miller, Canfield, Paddock and Stone, P.L.C.

(Firm/Company)

150 West Jefferson Avenue, Suite 2500

(Address)

Detroit, Michigan 48226-4415

(City/State and Zip code)

For further information concerning this matter, please call:

Melissa M. Harakas

(Name of Person)

at (313) 496-7691

(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 &
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. Versatile Processing Group, 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. Delaware 3. 56-2520755
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 06/28/2005 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

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

7. 7755 East 89th Street, Indianapolis, IN 46256
(Principal office address)

Same as above
(Current mailing address)

8. The purpose is to engage in any lawful act or activity for which corporations may be organized under the General
Corporation Law of Delaware.
(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: NRAI Services, Inc.

Office Address: 2731 Executive Park Drive, Suite 4

Weston, Florida 33331
(City) (Zip code)

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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.

by: Lisa Reeves
(Registered agent's signature)

Lisa Reeves, Assistant Secretary

9/13/06

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: Please see attached Addendum

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Please see attached Addendum

Address: _____

Vice President: _____

Address: _____

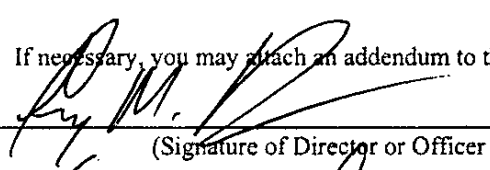
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

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

14. Gregory M. Dorman Secretary
(Typed or printed name and capacity of person signing application)

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Addendum: Directors and Officers

Directors

Daniel J. Dorman	40950 Woodward Avenue, Ste 304 Bloomfield Hills, MI 48304
Gregory M. Dorman	40950 Woodward Avenue, Ste 304 Bloomfield Hills, MI 48304
Robert Van Vliet	7755 East 89 th Street Indianapolis, IN 46256
Terrance M. Shipp	303 West Madison Street, Ste. 2100 Chicago, IL 60606
Brian M. Soeldner	303 West Madison Street, Ste. 2100 Chicago, IL 60606

Officers

Chairman of the Board	Daniel J. Dorman	40950 Woodward Avenue, Ste 304 Bloomfield Hills, MI 48304
Chief Executive Officer and President	Robert Van Vliet	7755 East 89 th Street Indianapolis, IN 46256
Secretary	Gregory M. Dorman	40950 Woodward Avenue, Ste 304 Bloomfield Hills, MI 48304
Treasurer and President	Patrick J. Brazill	7755 East 89 th Street Indianapolis, IN 46256

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Delaware

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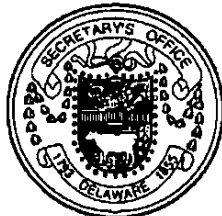
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "VERSATILE PROCESSING GROUP, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRD DAY OF AUGUST, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

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TALLAHASSEE, FLORIDA



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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4949803

DATE: 08-03-06