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Florida Department of State
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From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION

DSI Installations Inc.

| | |
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| Certificate of Status | 0 |
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**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. DSI Installations 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. Delaware

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

3. 20-8081559

(FBI number, if applicable)

4. 12/22/2006

(Date of incorporation)

5. Perpetual

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

6. 01/01/2007

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

7. 845 Larch Avenue, Elmhurst, IL 60126

(Principal office address)

same

(Current mailing address)

8. SEE ATTACHMENT

(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: C T Corporation System

Office Address: 1200 South Pine Island Road

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.*

C T Corporation System

By: Sarah B. Ayala

(Registered agent's signature)

Sarah B. Ayala
Assistant Secretary

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:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. DIRECTORS *SEE ATTACHMENT*

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS *SEE ATTACHMENT*

President: Richard LeMond

Address: 225 Tower Drive

Middletown, NY 10941

Vice President: Mary Wong

Address: 845 Larch Avenue

Elmhurst, IL 60126

Secretary: Michael E. Flannery

Address: 845 Larch Avenue, Elmhurst, IL 60126

Treasurer: Colleen M. O'Connor

Address: 845 Larch Avenue, Elmhurst, IL 60126

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. Michael E. Flannery, Secretary
(Typed or printed name and capacity of person signing application)

**Attachment to Florida
Purpose Clause**

The purpose of the Corporation is to engage in any and all lawful business in which corporations may engage in the state, province or country under whose law the foreign corporation is incorporated.

Officers & Directors

- | | | |
|---|-------------------|-------------------------|
| 1 | Full Name: | Scott A. Mordell |
| | Officer/Director: | Officer |
| | Officer's Title: | Chief Executive Officer |
| | Director's Title: | |
| | Business Address: | 845 Larch Avenue |
| | City: | Elmhurst |
| | State: | IL |
| | ZIP Code: | 60126 |
| 2 | Full Name: | Richard L. Duchossois |
| | Officer/Director: | Director |
| | Officer's Title: | |
| | Director's Title: | Director |
| | Business Address: | 845 Larch Avenue |
| | City: | Elmhurst |
| | State: | IL |
| | ZIP Code: | 60126 |
| 3 | Full Name: | Craig J. Duchossois |
| | Officer/Director: | Director |
| | Officer's Title: | |
| | Director's Title: | Director |
| | Business Address: | 845 Larch Avenue |
| | City: | Elmhurst |
| | State: | IL |
| | ZIP Code: | 60126 |
| 4 | Full Name: | Robert J. Carroll |
| | Officer/Director: | Director |
| | Officer's Title: | |
| | Director's Title: | Director |
| | Business Address: | 845 Larch Avenue |
| | City: | Elmhurst |

State:
ZIP Code:

IL
60126

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "DSI INSTALLATIONS 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 EIGHTEH DAY OF MARCH, A.D. 2007.

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

4273577 8300

070297277



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5491660

DATE: 03-08-07