

F09000003679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000160223370

09/14/09--01027--011 **70.00

APPROVED
AND
FILED

09 SEP 14 PM 4:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VH

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 62 SGAC, 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:

Lu Ann Locke

Name of Person

62 SGAC, INC

Firm/Company

4521 HEDGE RD

Address

ROXANA, IL 62084

City/State and Zip code

luannl@62sports.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lu Ann Locke

Name of Person

at (618) 459-0262

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. 62 SGAC, 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

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

3. 26-1441655

(FEI number, if applicable)

4. 11/19/07

(Date of incorporation)

5. Perpetual

(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. 4521 HEDGERD, ROKANA, IL 62054

(Principal office address)

4521 HEDGERD, ROKANA, IL 62054

(Current mailing address)

8. Event Management / Production: Service Provider for Company Picnics

(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 DR, STE 4

Weston

(City)

Florida 33331

(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.

NRAI Services, Inc.

By: Matt Thompson

(Registered agent's signature)

Matt Thompson, 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.

09 SEP 14 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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

A. DIRECTORS

Chairman: JOHN H. SMITH

Address: 95 LOG HILL LANE
BACCHAN, Mo. 63011

Vice Chairman: BRENT FREEMAN

Address: 2715 HUNTERS CROSSING DR.
EDWARDSVILLE, IL 62025

Director: DAVID SEEM

Address: 6090 CARLISLE LANE
ALPHARETTA, GA. 30022

Director: MICHAEL FIELDS

Address: 15501 BETHEDA CIRCLE
WESTFIELD, IN 46074

B. OFFICERS

President: JOHN H. SMITH

Address: _____

Vice President: BRENT C. FREEMAN

Address: _____

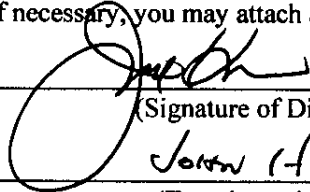
Secretary: BRENT C. FREEMAN

Address: _____

Treasurer: JOHN H. SMITH

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. John H. Smith
(Typed or printed name and capacity of person signing application)

APPROVED
AND
FILED

09 SEP 14 PM 4:12

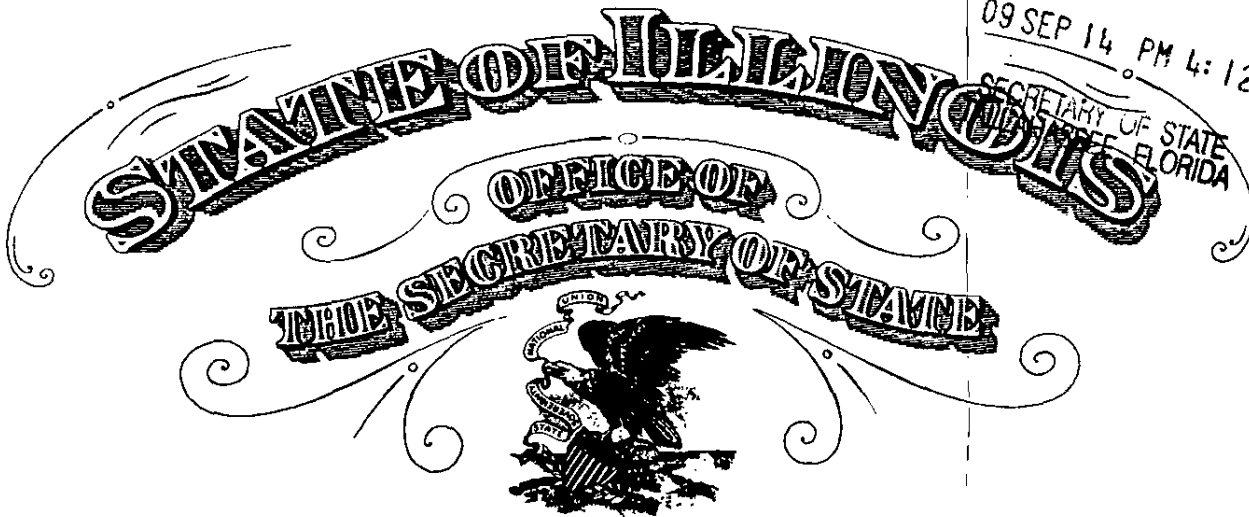
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

File Number 6635-730-9

APPROVED
AND
FILED

09 SEP 14 PM 4:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



To all to whom these Presents Shall Come, Greeting:

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

62SGAC, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON NOVEMBER 19, 2007, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE 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 31ST day of AUGUST A.D. 2009 .

Jesse White

Authentication #: 0924301384

Authenticate at: <http://www.cyberdriveillinois.com>

SECRETARY OF STATE