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(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:	
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Office Use Only



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DIVISION OF CORPORATIONS



AUG 13 2010

D. A. WHITE



SHIELD TECHNOLOGIES CORPORATION

Tel: 312-327-3180 Fax: 312-327-3174 www.envelopcovers.com

Direct Dial: 312-327-3178

July 28, 2010

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

New Filing Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re: Shield Technologies Corporation

Application by Foreign Business Corporation for Authorization

to Transact Business in Florida

Dear Sir or Madam:

Enclosed please find two originals and one copy of an executed Application by Foreign Business Corporation for Authorization to Transact Business in Florida, our check in the amount of \$720.00 and a stamped, self-address return envelope. Please a stamped received copy to my attention.

If you have any questions, or need additional information, please do not hesitate to contact me. Thank you for your assistance.

Very truly yours,

Ľaura Abzal

Executive Assistant

/la

Enclosures

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: Shield Technologies Corpora	ation		•
		- must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corp "Certificate of Existence," or "Certificate of above referenced foreign corporation to trans	f Good Stan	ding" and check are subr	t Business in Florida," nitted to register the
Please return all correspondence concerning	g this matter	to the following:	
Andrew G. Logan			
	Name of	Person	
Logan & Associates Ltd.			
-	Firm/Com	pany	
1866 Sheridan Road Suite 317			
	Addre	SS	
Highland Park, IL 60035			
	City/State ar	nd Zip code	
alogan@logancpa.com			
E-mail address:	(to be used t	or future annual report ne	otification)
For further information concerning this mat	ter, please c	all:	
Andrew G. Logan a	847) 433-1650	
Name of Person		Code & Daytime Telepho	ne Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amou		MAILING AI New Filing Sec Division of Co P.O. Box 6327 Tallahassee, FI	ction rporations
✓ \$70.00 Filing Fee ☐ \$78.75 Filing Certificate of	Fee & 🚨	\$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. AUG 11 P3: 19 Shield Technologies Corporation (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) (State or country under the law of which it is incorporated (FEI number, if applicable) 3/02/04 5. Perpetual (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual") 6. 1/1/2009 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) (Principal office address) (Current mailing address) g Consulting (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) Andy Parks Name: 11987 SW Knightbridge Lane Office Address: Port St. Lucie , Florida 34987 (Zip code) (City) 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. 'n

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: Samuel Wm. Sax	FILED
Address: 181 W. Madison, Suite 3900, Chicago, IL 60602	2010 AUG 11 P3: 14
Vice Chairman: Thomas F. Sax	SEURETARY OF STATE TAIL AHASSEE, FLORIDA
Address: 3091 Summit, Highland park, IL 60035	
Director: William P. Weible	
Address: 2300 Cabot Drive, Suite 100, Lisle, IL 60532	
Director: Samuel Wm. Sax	
B. OFFICERS President: Samuel Wm. Sax	· · · · · · · · · · · · · · · · · · ·
Address: 181 W. Madison, Suite 3900, Chicago, IL 60602	
Vice President:	
Secretary:	
Freasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing addi	
(Signature of Director or Officer listed in number 12 of the	application)
4, Thomas F. Sax, Vice Chairman (Typed or printed name and capacity of person signing as	onlication)
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Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SHIELD TECHNOLOGIES CORPORATION" 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 TWENTY-FIFTH DAY OF JUNE, A.D. 2010.

2000 AUG || P3: 19
SECRETARY OF STATE
ALLASSEF FLORIDA

3771581 8300

100681578

You may verify this certificate online at corp.delaware.gov/authver.shtml

AUTHENTY CATION: 8078017

DATE: 06-25-10