F10000004305

(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:
Per Eugene on 9/21- OK to correct out 1.
OK to COLLECTION 1.

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W1-30291

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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: CHAFFEE GA	Wur, Inc
Name of corporation - must	include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authoris "Certificate of Existence," or "Certificate of Good Standing" are above referenced foreign corporation to transact business in Flo	nd check are submitted to register the
Please return all correspondence concerning this matter to the fo	ollowing:
EUGENE J. SIEBURG	
Name of Person	
CHAFFEE GROUP, INC	
Firm/Company	
720 N. FRANKLIN, SUITE	401
Address	
EUGENE J. SIEBURG Name of Person CHAFFEE GROUP, INC Firm/Company 720 N. FRANKLIN, SUITE Address CHICAGO, IL 60654 City/State and Zip c	
City/State and Zip c	ode
GSIEBURG @ EPUBLISHING	G. COM
E-mail address: (to be used for future	e annual report notification)
For further information concerning this matter, please call:	
FUGENE SIEMRE at (312)	377-7409
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:	
	5 Filing Fee & S87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 13, 2010

EUGENE SIEBURG 720 N FRANKLIN SUITE 401 CHICAGO, IL 60654

SUBJECT: CHAFFEE GROUP, INC.

Ref. Number: W10000038291

We have received your document for CHAFFEE GROUP, INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees: \$35.00
Registered Agent
Designation \$35.00
Certified Copy \$8.75
Certificate of Status \$8.75

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight Regulatory Specialist II New Filing Section

Letter Number: 810A00019501

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. BRUKOFF-CHAFFEE MARKETING COMMUNICATIONS,	
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	CORPORATION,"
(If name unavailable in Florida, enter alternate corporate name adopted for the pur	
J	6-4131233
(State or country under the law of which it is incorporated) (FI	I number, if applicable)
$\frac{1-2-1997}{\text{(Date of incorporation)}} 5. \frac{95}{(Duration: Year of the second of $	RPETUAL_
	orp. will cease to exist or "perpetual")
8-1-2010	
(Date first transacted business in Florida, if prior to (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine	
800 BEN FRANKLIN #100, SARA-807	A FL 34236
(Principal office address)	
720 N. FRANKLIN, SUITE 401, CHI	CAGO IL 60654
(Current mailing address)	
(Purpose(s) of corporation authorized in home state or country, to be carried	nergy = S
. Name and street address of Florida registered agent: (P.O. Box NOT accept	
Name: GGRI BRUKOFF- CHAFFEE	
Office Address: 800 BEN FRANKLIN #108	OF STATE PHIZ: 06 473 6
SARASOTA, Florida (City), Florida	4736 8 글째
(City) , 1 to 1 da (2	ip code)
0. 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.

(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:

	ECTORS		
Chairman:	GERALDINE BRUKOFF- CLAFFEE		
Address:	800 BEN FRANKLIN #108		
_	SARASOTA FL 34736		
Vice Chair	rman:		
_			
Director:			
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•			50
Director		10	SE(
		SEP.	黑黑
Address: _		30	ORF
,		7	300
B. OFFI		<u>5</u>	A STA
	GERALDING PAUKOFF-CHAFFEE	<u>8</u>	<u> </u>
Address: _	SARASOTA FL 34736		<u> </u>
Vice Presi	dent: PERAZDINE PARUKOFF- CHAFFEE		
Address: _			
-	AME		
Secretary:	GERALDINE BRUKOG - CHAPPEE		
Address: _	9AME		
Treasurer:	GERALDINE BRUKOFF- CHAFFEE		
Address:	SAME		
_			
NOTE: I	If necessary, you may attach an addendum to the application listing additional officers and/or direct	ors.	
13	(Signature of Director or Officer listed in number 12 of the application)		
14	GERI PARUKOFF- CHAPFEE PRESIDENT	T_	
	(Typed or printed name and capacity of person signing application)		

File Number

5919-865-3



To all to whom these Presents Shall Come, Greeting:

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

BRUKOFF-CHAFFEE MARKETING COMMUNICATIONS, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 02, 1997, 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.



Authentication #: 1021700354

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

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 5TH

day of AUGUST

A.D.

2010

SECRETARY OF STATE