

Florida Department of State

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FOREIGN PROFIT/NONPROFIT CORPORATION AQUION, INC.

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7/13/2011

SECRETARY OF SIAIL DIVISION OF CORPORATION

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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.

	rporation; must include "INCORPORAT rp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATION,"
	• • • • • • • • • • • • • • • • • • • •	
<del>4 </del>		
(If name unavaila	ble in Florida, enter alternate corporate na	ame adopted for the purpose of transacting business in Florida)
DELAWARE		3. 13-4316527
(State or country of	under the law of which it is incorporated)	(FEI number, if applicable)
11/14/2005		5. PERPETUAL
(Date	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
04/18/2011		
		ess in Florida, if prior to registration) 97.1502, F.S., to determine penalty liability)
2080 E. LUNT A	VENUE, ELK GROVE VILLAGE, IL 600	007
	(Principal office	address)
2080 E. LUNT AV	VENUE, ELK GROVE VILLAGE, IL 600	007
	(Current mailing	address)
Manufacturing an	d distribution of water treatment and air f	iltration systems.
		or country to be carried out in state of Florida)
(Purpose(s)		or country to be carried out in state of Florida)
(Purpose(s)	of corporation authorized in home state of address of Florida registered agent:	(P.O. Box <u>NOT</u> acceptable)
(Purpose(s)	of corporation authorized in home state of taddress of Florida registered agent:  Corporation Service Company	(P.O. Box <u>NOT</u> acceptable)
(Purpose(s)  Name and street  Name:	of corporation authorized in home state of address of Florida registered agent:	(P.O. Box <u>NOT</u> acceptable)
(Purpose(s)  Name and street  Name:	of corporation authorized in home state of taddress of Florida registered agent:  Corporation Service Company	(P.O. Box NOT acceptable)  Florida 32301
(Purpose(s)  Name and street  Name:	of corporation authorized in home state of taddress of Florida registered agent:  Corporation Service Company  1201 Hays Street	(P.O. Box NOT acceptable)  Florida 32301
(Purpose(s)  Name and stree  Name:  Office Address:	of corporation authorized in home state of taddress of Florida registered agent:  Corporation Service Company  1201 Hays Street  Tallahassee  (City)	(P.O. Box NOT acceptable)  , Florida 32301 (Zip code)
(Purpose(s)  Name and street  Name:  Office Address:  0. Registered ag	corporation authorized in home state of taddress of Florida registered agent:  Corporation Service Company  1201 Hays Street  Taliahassee  (City)  Taliahassee (City)	(P.O. Box NOT acceptable)  (P.O. Box NOT acceptable)  , Florida 32301 (Zip code)  Pervice of process for the above stated corporation at the plants of the p
(Purpose(s)  Name and stree  Name:  Office Address:  O. Registered ag  Iaving been name  esignated in this	corporation authorized in home state of taddress of Florida registered agent:  Corporation Service Company  1201 Hays Street  Taliahassee  (City)  Taliahassee  (City)  Taliahassee  (City)	(P.O. Box NOT acceptable)  (P.O. Box NOT acceptable)  , Florida 32301  (Zip code)  ervice of process for the above stated corporation at the plantment as registered agent and agree to act in this capacity.
(Purpose(s)  . Name and stree  Name:  Office Address:  0. Registered ag faving been name lesignated in this further agree to co	corporation authorized in home state of taddress of Florida registered agent:  Corporation Service Company  1201 Hays Street  Taliahassee  (City)  Gent's acceptance:  ed as registered agent and to accept so application, I hereby accept the appoomply with the provisions of all statut	(P.O. Box NOT acceptable)  , Florida 32301  (Zip code)  ervice of process for the above stated corporation at the plaintment as registered agent and agree to act in this capacites relative to the proper and complete performance of my
(Purpose(s)  Name and street  Name:  Office Address:  O. Registered aghaving been name designated in this further agree to cound I am familiar	corporation authorized in home state of taddress of Florida registered agent:  Corporation Service Company  1201 Hays Street  Taliahassee  (City)  Taliahassee  (City)  Taliahassee  (City)	(P.O. Box NOT acceptable)  , Florida 32301  (Zip code)  ervice of process for the above stated corporation at the plaintment as registered agent and agree to act in this capacites relative to the proper and complete performance of my
(Purpose(s)  Name and street  Name:  Office Address:  O. Registered aghaving been name designated in this further agree to cound I am familiar	corporation authorized in home state of taddress of Florida registered agent:  Corporation Service Company  1201 Hays Street  Taliahassee  (City)  Taliahassee	(P.O. Box NOT acceptable)  , Florida 32301  (Zip code)  ervice of process for the above stated corporation at the plaintment as registered agent and agree to act in this capacites relative to the proper and complete performance of my

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.

SECRETARY OF STAIL DIVISION OF CORPORATION:

12. Names and business addresses of officers and/or directors: 2011 JUL 13 PH 12: 49 A. DIRECTORS Chairman: Address: . MICHAEL DIEBER Director: Address: 245 PARK AVENUE, 45TH FLOOR, NEW YORK, NEW YORK 10167 Director: CHRISSY LAMONT Address: 245 PARK AVENUE, 45TH FLOOR, NEW YORK, NEW YORK 10167 Director: TIMOTHY LOWER Address: 245 PARK AVENUE, 45TH FLOOR, NEW YORK, NEW YORK 10167 **B. OFFICERS** CALVIN T. STUART Address: 2080 E. LUNT AVE. ELK GROVE VILLAGE, IL 60007 CHIEF FINANCIAL CALVIN T. STUART Address: 2080 E. LUNT AVE. ELK GROVE VILLAGE, IL 60007 Secretary: CALVIN T. STUART Address: 2080 E. LUNT AVE. ELK GROVE VILLAGE, IL 60007 Treasurer: \_EDWARD MEII. Address: 2080 E. LUNT AVE. ELK GROVE VILLAGE, IL 60007 NOTE: If necessary, you may attach the addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. CALVIN T. STUART, CHIEF OPERATING OFFICER

## Delaware

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AQUION, 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 SIXTH DAY OF JULY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "AQUION, INC." WAS INCORPORATED ON THE FOURTEENTH DAY OF NOVEMBER, A.D. 2005.

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

4060055 8300

110796318

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

Jeffrey W. Bullock, Secretary of State STCATION: 8884572

DATE: 07-06-11