F 11000004014

(Re	equestor's Name)				
(Address)					
(Address)					
(Au	iuic33)	•			
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(50	Siless Littly Wall	iie)			
•					
(Document Number)					
Certified Copies Certificates of Status					
·					
· · · · · · · · · · · · · · · · · · ·					
Special Instructions to Filing Officer:					
		ļ			

Office Use Only



800212579468

10/06/11--01009--003 **70.00

2011 OCT -6 AM II: 42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1.544668 OCT 07 2011

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: OROS BROTHERS TUCORPOVATED 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," or "Certificate of Good Standing" 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:	
GEORGE R. OROS Name of Person	
OROS BROTHERS. INC. Firm/Company 1641 FOX TRAIL PRIVE Address BATAVIA Illivors 60510	
1641 FOX TRAIL PRIVE Address	
BATAVIA I//WOIS 605/0 City/State and Zip code	
BUZZOROS © YAHOO, COM E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	7
Storge Onos at (630) \$165738 Name of Person Area Code & Daytime Telephone Number Fig. Store Store	T F T T
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 & Certified Copy \$87.50 Filing Fee, Certified Copy 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. OROS BI	ROS., INC.		
(Enter name of corporatio "Inc.," "Co.," "Corp," "Inc		O," "COMPANY," "CORPORATION,"	,
(If name unavailable in Fi	orida, enter alternate corporate nam	e adopted for the purpose of transacting	business in Florida)
2. <u>I//INOIS</u>	3	. 36 - 2709147 (FEI number, if applic	
(State or country under the	law of which it is incorporated)	(FEI number, if applic	able)
4. APRIL 2	0. 1971 5	£	
(Date of incorp	poration)	(Duration: Year corp. will cease to e	xist or "perpetual")
6			
		in Florida, if prior to registration)	
		1502, F.S., to determine penalty liability	
7. 1641 FOX	TRALL DRIVE	dress) BATAVIA, IC.	60510
	(Principal office ad	dress)	
	SAME (Current mailing ad		
	(Current mailing ad	dress)	
8. Retail	SAles		•
(Purpose(s) of corp	oration authorized in home state or o	country to be carried out in state of Florie	ia)
9. Name and street addres	s of Florida registered agent: (P.	O. Box NOT acceptable)	201 SE ALL
		2025 115 516	FIL 2011 OCT -6 SECRETARY ALLAHASSEE
Name: (<u>G</u> E	orge R. UROS) o	2KO \$ 15/Cas. 10C	AS.
Office Address:	Altera TRAIN	OROS BAOS. INC 901 S. FEDERAL H (c , Florida 33009 (Zip code)	1.10
	SORALBO HALLANDA	le , Florida 33009	FS S
	(City)	(Zip code)	F STATE
10. Registered agent's ac	cceptance:		A. 10
Having been named as reg	gistered agent and to accept serv	vice of process for the above stated c	orporation 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.

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: _ Vice Chairman: Address: **B. OFFICERS** President: GEONGE R. OROS Address: 1641 FOX TRACE OR. Vice President: Dorinda A. OROS Address: 1641 FOX TRAIL DR. Secretary: Address: __ Treasurer: __ Address: NOTE: If necessary, you may attach an 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. GEORGE R. OROS PRESIDENT



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

OROS BROS., INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON APRIL 20, 1971, 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.

SECRETARY OF STATE



In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of

the State of Illinois, this 8TH

day of

SEPTEMBER

A.D.

2011

Authentication #: 1125100447 . Verify at www.cyberdriveillinois.com

SECRETARY OF STATE