

F12000000011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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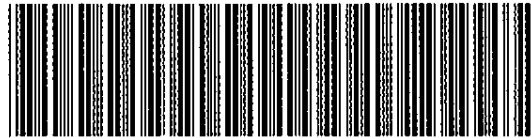
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**DATE: 01-03-2012**

**NAME: STELLAR DISTRIBUTION SERVICES, INC.**

**TYPE OF FILING: APPLICATION BY FOREIGN CORPORATION TO  
TRANSACT BUSINESS IN FLORIDA**

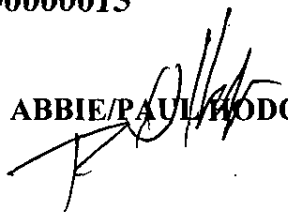
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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**



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## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** \_\_\_\_\_  
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:

\_\_\_\_\_ **Amy Huskins** \_\_\_\_\_

\_\_\_\_\_ Name of Person \_\_\_\_\_

\_\_\_\_\_ Firm/Company \_\_\_\_\_

\_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_ City/State and Zip code \_\_\_\_\_

\_\_\_\_\_ amy.huskins@cn.ca \_\_\_\_\_

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

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
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:

- ☐ \$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. STELLAR DISTRIBUTION SERVICES, 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. 36-3901405

(FEI number, if applicable)

4. 7/20/1993

(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. 17641 SOUTH ASHLAND AVENUE, HOMEWOOD, ILLINOIS 60430

(Principal office address)

17641 SOUTH ASHLAND AVENUE, HOMEWOOD, ILLINOIS 60430

(Current mailing address)

8. DISTRIBUTION SERVICES

(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: CT CORPORATION SYSTEM

Office Address: 1200 SOUTH PINE ISLAND ROAD

PLANTATION

(City)

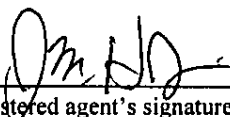
, Florida 33324

(Zip code)

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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.*



**James Halpin**  
**Assistant Secretary**

(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:

**A. DIRECTORS**

Chairman: PLEASE SEE ATTACHED EXHIBIT A

Address: \_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: PLEASE SEE ATTACHED EXHIBIT A

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: \_\_\_\_\_

Address: \_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

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. KEITH REARDON, PRESIDENT

(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

**EXHIBIT A  
TO  
FLORIDA APPLICATION FOR CERTIFICATE OF AUTHORITY  
OF  
STELLAR DISTRIBUTION SERVICES, INC.**

**OFFICERS:**

Keith Reardon	-	President
Roger Shaw	-	Secretary and Treasurer
Gary Buccilli	-	General Manager

**DIRECTORS:**

Keith Reardon  
Gilles Legault  
Michael Suter

**ADDRESS:**

17641 South Ashland Avenue  
Homewood, Illinois 60430

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**EXHIBIT B**  
**TO THE APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO**  
**TRANSACTION BUSINESS IN FLORIDA**

8. Purpose of corporation authorized in home state to be carried out in the state of Florida:

To carry on a transportation business in all of its aspects in arranging for the transportation of property in foreign, interstate and intrastate commerce and provide all services incident thereto for the shipping public. To carry on, in connection with the foregoing, a general freight handling, distribution and warehouse business.

To apply for and obtain any and all governmental licenses in order to carry on the aforesaid business.

To transact any or all lawful business for which corporations may be organized under the Florida Business Corporation Act.

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TALLAHASSEE, FLORIDA

File Number 5739-547-8



*To all to whom these Presents Shall Come, Greeting:*

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

STELLAR DISTRIBUTION SERVICES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JULY 20, 1993, 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 23TH day of DECEMBER A.D. 2011 .*

*Jesse White*

SECRETARY OF STATE

Authentication #: 1135700542

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