

F12000000138

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

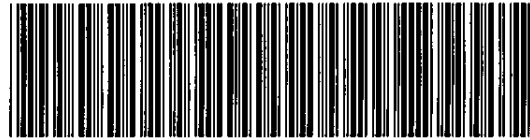
Certificates of Status _____

Special Instructions to Filing Officer:

CORRECTED "NAME OF CORP."
AND ADDED "DURATION" PER
TELEPHONE CONVERSATION
WITH SARA OLCZKOWICZ.

K 01/11/12

Office Use Only



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01/10/12--01026--002 **70.00

FILED
12 JAN 10 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 01/11/12



J&S Power Solutions, Inc.

201 E. Ogden Ave. Suite 14 Hinsdale, IL 60521 • Tel: (630) 325-9500 • Fax: (630) 325-9510

Toll free: (800) 930-1532

E-mail: solutions@jandspower.com

DATE: 12/20/11

Dissolution Filing

Attn: FL Dept. of State Division of Corps.

Please note J&S Power Solutions, Inc. has no intention of revoking the voluntary dissolution; please release the company name to be used again.

I had registered our company as a (FL profit Corp.) I was then told by the legal counsel that since we are located in IL that I would have to register as a foreign corp. That being said I was then told I would have to complete the on-line dissolution filing before registering as a foreign corp. If you have any questions regarding this request please contact our office.

Sincerely,

A handwritten signature in cursive script that reads 'Sara Oczkiewicz'.

Sara Oczkiewicz
(Director of Management)

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

J & S Power Solutions, Inc.

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:

Philip Scaria
Name of Person

J & S Power Solutions, Inc.
Firm/Company

201 E. Ogden Ave Ste 14
Address

Hinsdale, IL 60521
City/State and Zip code

Solutions@jandspower.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Philip Scaria
Name of Person

at (630) 325-9500
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. J&S Power Solutions, 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 3. 36-4404327
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/27/00 5. PERPETUAL
(Date of incorporation) (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. 201 E. Ogden Ave. Sk. 14 Hinsdale, IL 60521
(Principal office address)

Same as above
(Current mailing address)

8. To provide maint. & emergency repairs to the UPS & batts. located @ Orlando Airport
(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)

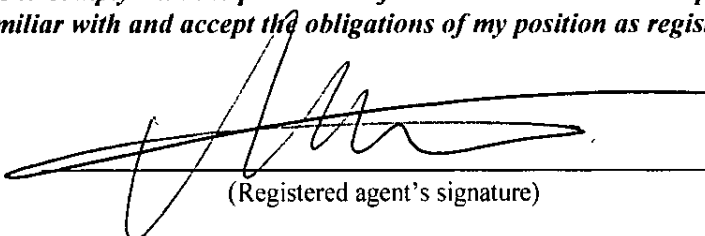
Name: Nidal Bitar

Office Address: 1714 N. Goldenrod Rd # C4
Orlando, Florida 32807
(City) (Zip code)

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TALLAHASSEE, FLORIDA

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.


(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: DOMINIC JOSEPH

Address: 3N434 Crown Rd.

Elmhurst, IL 60126

Vice Chairman: PHILIP SCARIA

Address: 1301 DARIEN CLUB DR.

DARIEN, IL 60561

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: DOMINIC JOSEPH

Address: 3N434 Crown Rd.

Elmhurst, IL 60126

Vice President: PHILIP SCARIA

Address: 1301 DARIEN CLUB DR.

DARIEN, IL 60561

Secretary: PHILIP SCARIA

Address: 1301 DARIEN CLUB DR

Treasurer: ACHAMMA SCARIA

Address: 1301 DARIEN CLUB DR, DARIEN, IL-60561

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

13. Philip Scaria

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. PHILIP SCARIA (VICE PRESIDENT)

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

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12 JAN 10 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

File Number 6134-627-9



To all to whom these Presents Shall Come, Greeting:

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

J&S POWER SOLUTIONS, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON NOVEMBER 27, 2000, 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 20TH day of DECEMBER A.D. 2011

Jesse White

Authentication #: 1135401924

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

SECRETARY OF STATE