

F120000000456

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

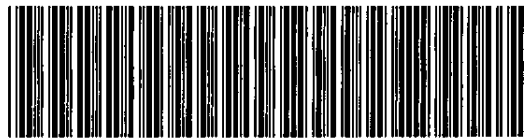
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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01/31/12--01020--001 **70.00

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12 JAN 31 PM 12:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
2/1/12

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: EBM, Inc

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:

David J. Liley

Name of Person

EBM, Inc

Firm/Company

855 Morse Ave

Address

2112 Grove Village, IL 60007

City/State and Zip code

djliley@graphicinnovators.com

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

For further information concerning this matter, please call:

David J. Liley

Name of Person

at (847) 621-8802

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. EBM, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

EBM FL, INC.
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Illinois 3. 36-0793297
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 4-11-74 5. perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 2-1-2012
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 855 Morse Ave Elk Grove Village, IL 60007
(Principal office address)

Same
(Current mailing address)

8. Janitorial Service
(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: Northwest Registered Agent LLC

Office Address: 3111 W. Dr. MLK Blvd., STE 100-B180

Tampa, Florida 33607
(City) (Zip code)

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.



Dan Keen-Manager

(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.

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TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

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A. DIRECTORS

Chairman: Rose Marie Wiley 12 JAN 31 PM 12:23

Address: 11 N 105 Flagpole Ct
Elgin, IL 60123 SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Michael J. Wiley

Address: 5815 Teal Ct.
Long Grove, IL 60047

Vice President: _____

Address: _____

Secretary: David J. Wiley

Address: 592 Groves Ct. Schaumburg, IL 60193

Treasurer: David J. Wiley

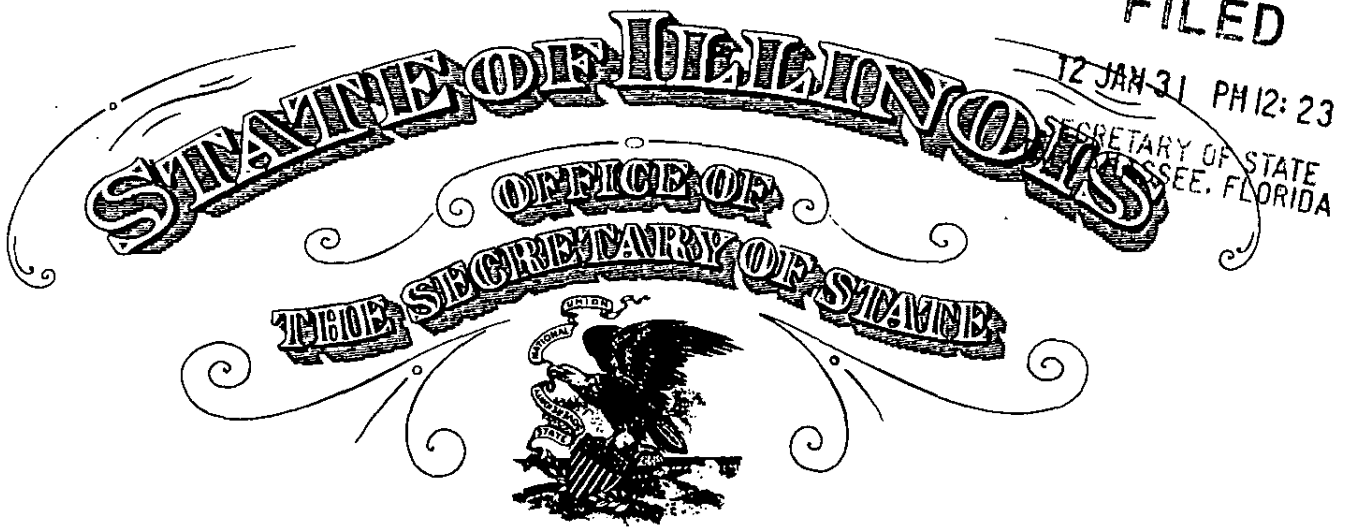
Address: Same

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

13. Rose Marie Wiley
(Signature of Director or Officer listed in number 12 of the application)

14. Rose Marie Wiley
(Typed or printed name and capacity of person signing application)

File Number 5042-715-3



To all to whom these Presents Shall Come, Greeting:

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

E.B.M., INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON APRIL 11, 1974, 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 25TH day of JANUARY A.D. 2012 .

Jesse White

Authentication #: 1202500416

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

SECRETARY OF STATE