

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your broken from the state of the sta Doing so will generate another cover sheet. Please retain original filling To: rporations date of submission Division of Corporations From: Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368 \*\*Enter the email address for this business entity to be used for fature annual report mailings. Enter only one email address please. \*\* Email Address: FOREIGN PROFIT/NONPROFIT CORPORATION STOELTING COMPANY Certificate of Status 0 Certified Copy Page Count 054 Estimated Charge \$70.00 J. SINNERS MAY Electronic Filing Menu Corporate Filing Menu Help

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May 21, 2012

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: STOELTING COMPANY

REF: W12000027999

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name you are requesting is unavailable, since it has been previously requested by another individual and the document was returned to the individual for corrections and has not yet been resubmitted.

The document number of the name conflict is W12000018045--STOELTING COMPANY.

If you have any further questions concerning your document, please call (850) 245-6052.

Ruby Dunlap Regulatory Specialist II New Filing Section FAX Aud. #: E12000133514 Letter Number: 812A00014778

\*RE-SUBMIT\*
Please retain original filing
date of submission \_suz

P.O BOX 6327 - Taliahassee, Florida 32314

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850-617-6381



May 18, 2012

FLORIDA DEPARTMENT OF STATE
Davision of Corporations

C T CORPORATION SYSTEM

SUBJECT: STOELTING COMPANY

REF: W12000027733

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The name you are requesting is unavailable, since it has been previously requested by another individual and the document was returned to the individual for corrections and has not yet been resubmitted.

If you have any further questions concerning your document, please call (850) 245-6052.

Tim Burch Regulatory Specialist II New Filing Section FAX Aud. #: E12000133514 Letter Number: 012A00014693

\*RE-SUBMIT\*
Please relain original filing
date of submission \_\_sin\_

P.O BOX 6327 - Tallahassee, Florida 32314

## **COVER LETTER**

TO: New Filing Section Division of Corporations	
SUBJECT: Stoelting Company	
Name of porporation - 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:	
Mark Cochran Zaga 22	
Name of Person	٠,
Mark Cochran  Name of Person  Stoelting Co.  Firm/Company  620 Wheat Lane  Address	•
Firm/Company	•
620 Wheat Lane	4
Address 5	ď
Wood Dale, IL 60191	
City/State and Zip code	
mark@stoeltingco.com  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Mark Cochran at ( 630 ) 860-9700	
Name of Person Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:  New Filing Section  Division of Corporations  Clifton Building  MAILING ADDRESS:  New Filing Section  Division of Corporations  Division of Corporations  P.Q. Box 6327	
2661 Executive Center Circle Tallahassee, FL 32314	
Tallahassee, FL 32301	
Enclosed is a check for the following amount:	
S70.00 Filling Fee S78.75 Filling Fee & S78.75 Filling Fee & Certificate of Status & Certified Copy  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.

	able in Florida, enter alternate corporate	name adopted for the purpose of transacting business in Flor	rida)
(State or country	under the law of which it is incorporated	3, 36-2010162 (FEI number, if applicable)	
1944	•		
(Dat	of incorporation)	5. (Duration: Year corp. will coase to exist or "perpetu	al*')
August 201			
		ness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liability)	_
8695 Colle	ge Parkway #2160, Ft, N	• • • • • • • • • • • • • • • • • • • •	
0000 00110	(Principal offic		5
620 Whea	t Lane, Wood Dale, IL 60	D191	:03 :10
	(Current mailin	g address)	<u>चिं</u>
			Ē
Training			<u>~</u>
(Ригрозь(і	) of corporation authorized in home state	or country to be carried out in state of Florida)	Chi Go
Name and street	t address of Florida registered agent:		
Name:	CT Corporation	——————————————————————————————————————	-
ffice Address:	1200 S Pine Island Ro	d.	
	Plantation	33324	
		, Florida _	

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:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Mark Cochran	-1
Address: 1 Devonshire Drive, Oak Brook, IL 60523	Market Annual Control
Vice President Melinda Cochran	
Address: 8901 Mustang Island Circle, Naples, FL 34133	Maker 21
Segretary: Melinda Cochran	
Address: 8901 Mustang Island Circle, Naples, FL 34133	
Treasurer: Mark Coohran	
Address: 1 Devonshire Drive, Oak Brook, IL 60523	
NOTE: If necessary, you may patach 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. Mark Cochran  (Typed or printed terms and capacity of person signing application)	

File Number

5308509775

2776-015-5



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

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

STOELTING COMPANY, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 13, 1944, 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.





Authentication #: 1218702226 Authenticate at: http://www.cyberdrive/tilnois.com

In Testimony Whereof, I hereto sets

my hand and cause to be affixed the Great Seal of the State of Illinois, this

day of

MAY

A.D.

SECRETARY OF STATE