F12000002313

(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:					

Office Use Only

W12-28405



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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 23, 2012

SUSAN G. LECKINGER 2736 NORTHAMPTON ORLANDO, FL 32828

SUBJECT: PREFERRED SOLUTIONS, INCORPORATED

Ref. Number: W12000028405

We have received your document for PREFERRED SOLUTIONS, INCORPORATED and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is P93000000425 (PREFERRED SQLUTIONS, INC.).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Thomas Chang Regulatory Specialist II New Filing Section

Letter Number: 312A00015021

COVER LETTER

	TO: New Filing Section Division of Corporations				
	SUBJECT: Preferred Solutions	, Incorporated			
	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:				
	Susan G. Leckinger				
Name of Person					
Preferred Solutions, Incorporated					
	Firm	/Company			
	2736 Northampton				
		Address			
	Orlando Florida 32828				
	City/S	tate and Zip code			
	sleckinger@preferredsolutions.com				
E-mail address: (to be used for future annual report notification)					
	For further information concerning this matter, please call:				
	Susan G. Leckinger at (407) 384-9292 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 AD New Filing Sec Division of Cor P.O. Box 6327 Tallahassee, FL	tion porations		
÷ '	Enclosed is a check for the following amount:	•	r . u		
	\$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.

(Enter name of c	Solutions, Incorporated corporation; must include "INCORPORATE Corp," "Inc," "Co," or "Corp.")	D," "COMPANY," "CORPORATIO	DN,"				
PREFER (If name unavail	RED SOLUTIONS INCO. able in Florida, enter alternate corporate nar	RPORATED OF I ne adopted for the purpose of transact	LL INO IS ing business in Florida)				
2. Illinois		_{3.} 363851222					
(State or country	under the law of which it is incorporated)	(FEI number, if ap	plicable)				
4. December		5. perpetual					
•	e of incorporation)	(Duration: Year corp. will cease	o exist or "perpetual")				
6. <u>July 15, 20</u>	012 (est)	s in Florida, if prior to registration)					
		s in Florida, it prior to registration) '.1502, F.S., to determine penalty liabi	lity)				
7, 2736 Northampton Orlando, FL 32828							
· ·	(Principal office a						
2736 Nor	thampton Orlando, FL	32828					
	(Current mailing a	ddress)					
	nent Verification a) of corporation authorized in home state or	country to be carried out in state of F	lorida)				
			المستر المستر				
9. Name and stree	et address of Florida registered agent: (F	P.O. Box NOT acceptable)	2 1				
Name:	Susan G. Leckinger		W C				
Office Address:	2736 Northampton		SSST P				
	Orlando	, Florida <u>32828</u> (Zip code)	PH 12: 37 PH 12: 37				
	(City)	(Zip code)	25 3				
0. Registered as	gent's acceptance:		2				
Having been nam	ed as registered agent and to accept ser		•				
•	application, I hereby accept the appoin omply with the provisions of all statutes	0 0					
	crepty create the providence of was desirable		p				

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:	
Address:	
Vice Chairman:	
Address:	
Director: Paul M. Leckinger	
Address: 2736 Northampton	
Orlando, FL. 32828	
Director:	
Address:	
	12 May
B. OFFICERS	THE W LEARNING SERVICES
President:	M - 1
Address:	F 5 17
	제품을 33 DE 3
Vice President:	
Address:	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary, fourthan addendum to the application listing additional officers 13.	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	at the facts stated herein
are true and that he or she is aware that false information submitted in a document to the Departs third degree felony as provided for in s.817.155, F.S.	
Paul M. Leckinger Director	

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

File Number

5708-775-7



To all to whom these Presents Shall Come, Greeting:

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

PREFERRED SOLUTIONS, INCORPORATED, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON DECEMBER 04, 1992, 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 #: 1213801332

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

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 17TH

day of MAY

A.D.

2012

Desse White

SECRETARY OF STATE