F120000033557

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
Certified Copies Certificates of Status
. Octanica copies
Special Instructions to Filing Officer:
<u>.</u>





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COVER LETTER

TO:

New Filing Section Division of Corporations

Name of corporation - must include surfix
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:
Donald S. Madrzyk
O Name of Person
Onald S. Madrzyk Name of Person Shearer Warner Shitz 120 Firm/Company 778 W. Frontage Rd Address Northfield, II 60093 City/State and Zip code don @ Shearer Warner, Com E-mail address: (to be used for future annual report notification)
Firm/Company
778 W. Frontage Rd
Address
Northfield, II 60093
City/State and Zip code
don @ Shearer warner, com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Donald Madrzyk at (847) 784-0900 X 13 Name of Person Area Code & Daytime Telephone Number
uniterior de la companya de la comp La companya de la co
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 National Address: New Filing Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Tallahassee, FL 32301
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$70.00 Filing Fee \$78.75 Filing 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.

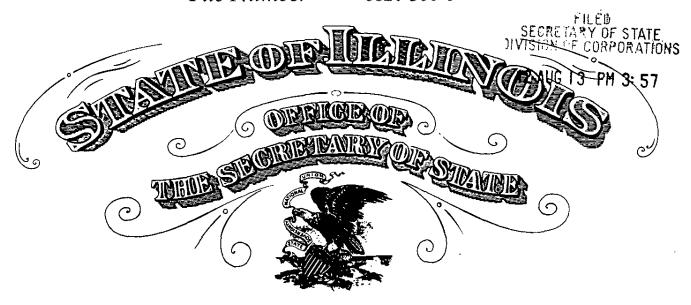
(If name unavai	lable in Florida, enter alternate corporate	name adopted for the purpose of transacting business in F	Florida	-
2 ILLINOIS	,	3. 46-0571067		,
	under the law of which it is incorporated			
4. 11/08/2011		5. PERPETUAL		
(Date	e of incorporation)	(Duration: Year corp. will cease to exist or "perp	etual'')	
6. <u>05/25/2012</u>				_
		ness in Florida, if prior to registration) 607.1502, F.S., to determine penalty liability)		
7 400 S CHE	DDV OT ITAGOA	0143		
·	(Principal office			-
400 S. CH	ERRY ST. ITASCA, ILLIN			_
	(Current mailing	g address)		
。THE TRAI	NSACTION OF ANY OR L	AWFULL BUSINESS		ن
		or country to be carried out in state of Florida)	72	- SEVI
9. Name and stree	et address of Florida registered agent:	(P.O. Box NOT acceptable)	AUG	52
Name:	NRAI SERVICES, INC.		13	유될
			PX	200 YE C
Office Address:	515 EAST PARK AVENUE		ယ္	POR
	TALLAHASSEE	, Florida 32301	3: 57	ATIC
	(City)	(Zip code)		SKC
	gent's acceptance:	naming of apparent for the above stated corresponding	ar elea	nlass
Having been nam	ed as registered agent and to accept s	service of process for the above stated corporation pointment as registered agent and agree to act in thi		
Having been nam designated in this further agree to c	ed as registered agent and to accept s application, I hereby accept the appo omply with the provisions of all statu	ointment as registered agent and agree to act in the utes relative to the proper and complete performance	is cap	acity. I
Having been nam designated in this further agree to c	ed as registered agent and to accept application, I hereby accept the application	ointment as registered agent and agree to act in the utes relative to the proper and complete performance	is cap	acity. I
Having been nam designated in this further agree to c	ed as registered agent and to accept application, I hereby accept the application, I hereby accept the applications of all status with and accept the obligations of members, INC.	ointment as registered agent and agree to act in the utes relative to the proper and complete performance	is cap	acity. I

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 SECRETARY OF STATE
Chairman: Dennis Szymkowiak
Address: 400 S. Cherry St.
Chairman: Dennis Szymkowiak Address: 400 S. Cherry St. Itasca, II 60143
Vice Chairman:
Address:
Director:
Address:
Director:
Address:
B. OFFICERS
President: Dennis Szymkowiak
Address: 400 S Cherry St.
President: Dennis Szymkowiak Address: 400 S. Cherry St. Itasca, Il 60143
Vice President:
Address:
Secretary: Dennis Szymkowiak Address: 400 S. Cherry St. Itasca, Il 60143
Address: 400 S. Cherry St. Itasa, Il 60143
Address: 400 S. Cherry St. Itasca, Il 60143 Treasurer: Dennis Szym Kowiak
Address: 400 S. Cherry St. Itasca, II 60143
O Company of the Comp
NOTE: If necessary, you may attach 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. <u>Dennis</u> Szymkowiak, <u>President</u> (Typed or printed name and capacity of person signing application)

File Number

6821-368-1



To all to whom these Presents Shall Come, Greeting:

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

REMODELING CONSULTANTS OF AMERICA, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON NOVEMBER 08, 2011, 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 #: 1220002018

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 18TH

day of

JULY

A.D.

2012

Desse White