

F13000000616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

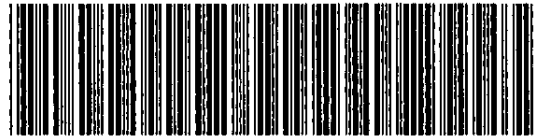
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/05/13--01026--015 **87.50

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DIVISION OF CORPORATIONS
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**Trilogy
Consulting
Group, Inc.**



www.trilogy-consulting.com

February 4, 2013

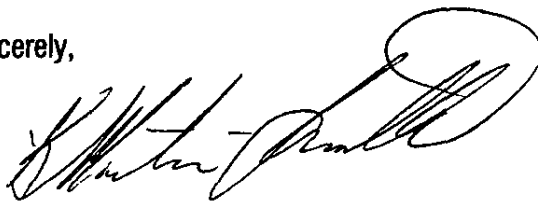
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Trilogy Consulting Group, Inc.

I previously sent my application via overnight delivery. While filing my copy of the application, I noticed that I had forgotten to sign it. Enclosed is a signed copy to replace the unsigned copy which you should have also received today via Fed Ex.

Thank you and should you have any questions, please do not hesitate contacting me.

Sincerely,



Kathy Martin-Smith
Vice President

2021 Midwest Road,
Suite 200
Oak Brook, IL 60523

(630) 953-6278 tel
(630) 953-8685 fax

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Trilogy Consulting Group, 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:

Kathy Martin-Smith

Name of Person

Trilogy Consulting Group, Inc.

Firm/Company

2021 Midwest Road, Suite 200

Address

Oak Brook, IL 60523

City/State and Zip code

kathymartinsmith@msn.com

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

For further information concerning this matter, please call:

Kathy Martin-Smith at (630) 953-6278

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 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. Trilogy Consulting Group, 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. 36-4016705

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

4. 4/21/95

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. 2021 Midwest Road, Suite 200, Oak Brook, IL 60523

(Principal office address)

2021 Midwest Road, Suite 200, Oak Brook, IL 60523

(Current mailing address)

8. Provide consulting services to orange County Public School District in Orlando, Florida

(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:

Kathy A. Martin-Smith

Office Address:

13 Mar Azul North

Ponce Inlet, FL

(City)

, Florida

32127

(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.


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

A. DIRECTORS

Chairman: None

Address: _____

Vice Chairman: None

Address: _____

Director: None

Address: _____

Director: None

Address: _____

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B. OFFICERS

President: Barbara L. Baldwin

Address: 2021 Midwest Road, Suite 200, Oak Brook, IL 60523

Vice President: Kathy A. Martin-Smith

Address: 2021 Midwest Road, Suite 200, Oak Brook, IL 60523

Secretary: Kathy A. Martin-Smith

Address: 2021 Midwest Road, Suite 200, Oak Brook, IL 60523

Treasurer: Kathy A. Martin-Smith

Address: 2021 Midwest Road, Suite 200, Oak Brook, IL 60523

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

13. _____

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. Kathy A. Martin-Smith, VP, Secretary & Treasurer
(Typed or printed name and capacity of person signing application)

File Number 5830-542-1



To all to whom these Presents Shall Come, Greeting:

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

TRILOGY CONSULTING GROUP, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON APRIL 21, 1995, 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 GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

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Authentication #: 1303502030

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 4TH day of FEBRUARY A.D. 2013 .

Jesse White

SECRETARY OF STATE

Confirmation # 146980