

F13000003761

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

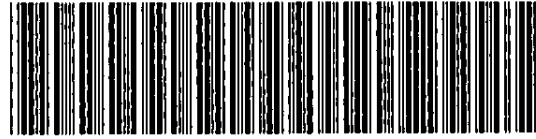
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500250511245

RECEIVED  
DEPARTMENT OF STATE  
13 SEP -3 AM 10:41

FILED  
13 SEP -3 AM 8:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

mes  
9/4/13



CORPORATION SERVICE COMPANY

FILED  
13 SEP -3 AM 8:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ACCOUNT NO. : I20000000195  
REFERENCE : 784640 4803460  
AUTHORIZATION : *[Signature]*  
COST LIMIT : \$ 70.00

ORDER DATE : September 3, 2013  
ORDER TIME : 10:16 AM  
ORDER NO. : 784640-005  
CUSTOMER NO: 4803460

FOREIGN FILINGS

NAME: GORDON N. STOWE AND ASSOCIATES, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER: \_\_\_\_\_

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Gordon N. Stowe and Associates, 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:

**Thomas Larson**

Name of Person

**Gordon N. Stowe And Associates, Inc.**

Firm/Company

**586 Palwaukee Drive**

Address

**Wheeling, IL 60090**

City/State and Zip code

**thomaslarsen@gordonstowe.com**

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

For further information concerning this matter, please call:

**Thomas Larson**

Name of Person

at ( **847** ) **459-1770**

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. Gordon N. Stowe and Associates, 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.
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 01/19/1976 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. 586 Palwaukee Drive, Wheeling, Illinois 60090
(Principal office address)

586 Palwaukee Drive, Wheeling, Illinois 60090
(Current mailing address)

8. Audiology equipment distributors
(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: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

FILED
13 SEP -3 AM 8:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Corporation Service Company

By: [Signature] Sue G. Knight
(Registered agent's signature) Assistant Vice President

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: See attached list.

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: See attached list.

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

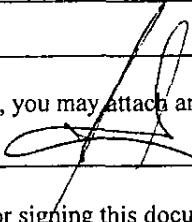
Address: \_\_\_\_\_  
\_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**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. Thomas Larsen, President

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

**FILED**  
**13 SEP -3 AM 8:52**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

Rider to Florida Application by Foreign Corporation for Authorization to Transact Business in  
Florida for  
Gordon N. Stowe and Associates, Inc.

FILED

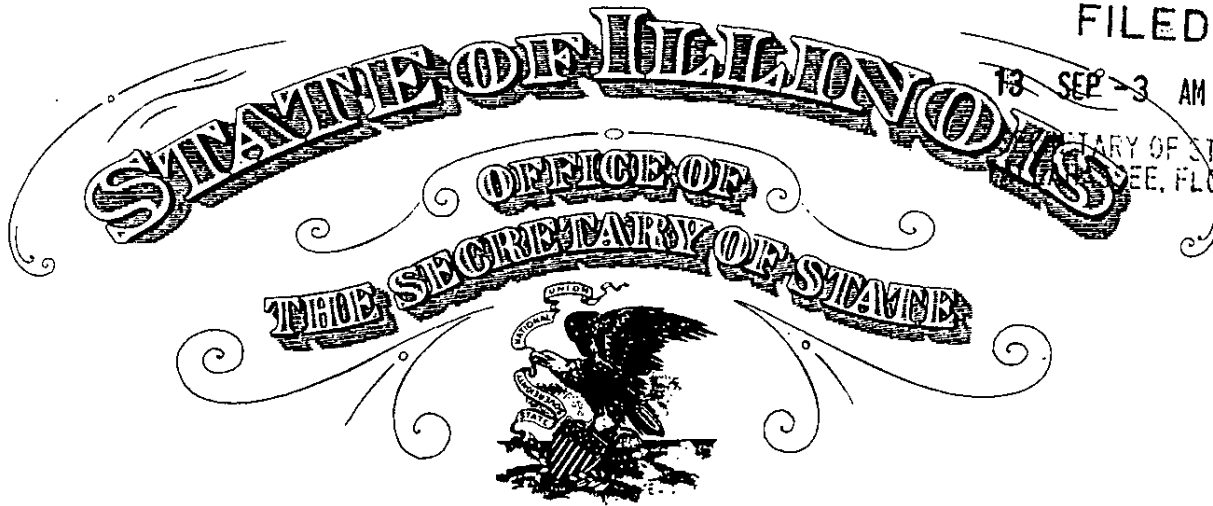
13 SEP -3 AM 8:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The names and business addresses of the officers and directors of the corporation are as follows:

Title	Name	Business Address
President	Thomas Larsen	586 Palwaukee Dr., Wheeling, IL 60090
Vice President	Chick Clemen	586 Palwaukee Dr., Wheeling, IL 60090
Secretary	Christine Koss	586 Palwaukee Dr., Wheeling, IL 60090
Director	Niels Jacobson	Kongebakken 9, 2765 Smørum, Denmark
Director	Arne Boye	Kongebakken 9, 2765 Smørum, Denmark
Director	Svend Thomsen	Kongebakken 9, 2765 Smørum, Denmark

File Number 5081-659-1



FILED

13 SEP -3 AM 8:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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

GORDON N. STOWE AND ASSOCIATES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 19, 1976, 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 3RD day of SEPTEMBER A.D. 2013 .*

*Jesse White*

Authentication #: 1324600796

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

SECRETARY OF STATE