# F14000001340

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PICK-UP	☐ WAIT	MAIL
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Special Instructions to F	iling Officer:	
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DIVISION OF SOME STATES

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### **COVER LETTER**

TO: New Filing Sec Division of Co				
SUBJECT: GRA	F AIR FRI	EIGHT, I	NC.	
	Name	of corporation	n - must include suffix	
Dear Sir or Madam:				
	ce," or "Certificat	e of Good Sta	· Authorization to Transa nding" and check are sub ess in Florida.	
Please return all corres	pondence concer	ning this matte	er to the following:	
NORMA RAN	IGEL			
		Name of	Person	
GRAF AIR F	REIGHT, I	NC.		
		Firm/Cor	npany	
550 WEST TA	AYLOR S	REET		
CHICAGO, IL	LINOIS 60	Addı 0607	ress	
		•	and Zip code	
NRANGEL@G				
	E-mail addres	ss: (to be used	for future annual report i	notification)
For further information	concerning this	matter, please	call:	
NORMA RAN	IGEL	312	987-9960	
Name of Perso		at (Area	Code & Daytime Teleph	one Number
STREET/COU New Filing Sec Division of Co- Clifton Buildin 2661 Executive Tallahassee, FI	rporations g e Center Circle	SS:	MAILING A New Filing Se Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
Enclosed is a check for	the following am	ount:		
□ \$70.00 Filing Fee	S78.75 Filin Certificate		\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status &



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 17, 2014

NORMA RANGEL 550 WEST TAYLOR STREET CHICAGO, IL 60607

SUBJECT: GRAF AIR FREIGHT, INC.

Ref. Number: W14000016974

We have received your document for GRAF AIR FREIGHT, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 214A00005722

#### 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 cor "Inc.," "Co.," "Cor	poration; must include "INCORPORATE p," "Inc," "Co," or "Corp.")	ED,"	"COMPANY," "CORPORATION,"	•	_
					_
	e in Florida, enter alternate corporate na		adopted for the purpose of transacting busines	s in Florida)	ſ
State or country un	der the law of which it is incorporated)	3.	36-2732189 (FEI number, if applicable)		_
-	• •		PERPETUAL		
· <del></del>			(Duration: Year corp. will cease to exist or '	'nernetual")	_
N/A	· ·······		(Summer For South Control	perpetuai )	
	(SEE SECTIONS 607.1501 & 60	7.15	Florida, if prior to registration) 602, F.S., to determine penalty liability)		_
550 W. TA	YLOR ST., CHICAGO,				
550 W/ TAN	(Principal office		,		
050 VV. 1A1	LOR ST., CHICAGO, IL				_
CUSTOME	ER SERVICE LOCATION		·	2814 MAR 25	;
(Purpose(s) o	f corporation authorized in home state or	r co	untry to be carried out in state of Florida)	*AR	_ 2
Name and street a	uddress of Florida registered agent: (	P.C	D. Box NOT acceptable)	25	1
Name:	Charles P. Morris		•	PH	677
ice Address:	3430 Teeside Drive		<del></del>	2: 25	
	New Port Richey		, Florida 34655	<del>,</del> , .	***
-	(City)		(Zip code)		

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)

<sup>11.</sup> 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: \_\_\_\_\_ Vice Chairman: \_\_\_\_\_ Address: Director: Address: \_\_ Director: **B. OFFICERS** President: MICHAEL EDWARD FITZGERLAD Address: 31825 SE 62ND ST. FALL CITY, WA 98024 Vice President: CYNTHIA A. MOORE Address: 549 N. MAIN ST. GLEN ELLYN, IL 60137 MICHAEL EDWARD FITZGERLAD Address: SAME AS ABOVE Treasurer: Address: \_\_\_\_\_ 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. CYNTHIA A. MOORE



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

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

GRAF-AIR FREIGHT, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON NOVEMBER 16, 1971, 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 #: 1404901062

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

**FEBRUARY** 

A.D.

2014

Desse White

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

SECRETARY OF STATE