

**F/140000002970**

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 JUL 10 AM 10:33

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AND  
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To:

Division of Corporations  
Fax Number : (850) 617-6381

**\*RE-SUBMIT\***

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

Please retain original filing  
date of submission 7/10

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_

**FOREIGN PROFIT/NONPROFIT CORPORATION  
Form Plastics Company**

Certificate of Status	1
Certified Copy	1
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Estimated Charge	\$737.50

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### COVER LETTER

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

**SUBJECT:** FORM PLASTICS COMPANY

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:

Jacque Petrakis

Name of Person

Form Plastics, Company Inc.

Firm/Company

3825 Stern Avenue

Address

Saint Charles, Illinois 60175

City/State and Zip code

jpetrakis@formplastics.com

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

For further information concerning this matter, please call:

Jacque Petrakis

at ( 630 ) 443-1400

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

7/11/2014 13:58:47 From: To: 8506176381

( 2/7 )

850-617-6381 7/11/2014 1:23:43 PM PAGE 1/001 Fax Server



July 11, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: FORM PLASTICS COMPANY  
REF: W14000042780

RECEIVED  
14 JUL 11 PM 2:48  
TALLAHASSEE, FL 32314

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

According to the application submitted to this office, this entity transacted business in the state of Florida before properly registering with the Florida Department of State, Division of Corporations. Consequently, a \$500 civil penalty and an annual report filing fee for each year the entity failed to properly file a Florida annual report are due this office. Based on the date entered on the application, the civil penalty and annual report filing fees total \$650.00.

The document must contain both the street address of the principal office and the mailing address of the entity.

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

Valerie Herring  
Regulatory Specialist II  
New Filing Section

FAX Aud. #: H14000164994  
Letter Number: 014A00014980

**\*RE-SUBMIT\***

Please retain original filing  
date of submission 7/10

P.O BOX 6327 - Tallahassee, Florida 32314

# 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. FORM PLASTICS COMPANY

(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. 36-2735088  
 (State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 03/13/1972 5. Perpetual  
 (Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. 5/28/2013  
 (Date first transacted business in Florida, if prior to registration)

(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 3825 Stern Ave St Charles, IL 60174  
 (Principal office address)
- 3825 Stern Ave St Charles, IL 60174  
 (Current mailing address)

## 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CT Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324  
 (City) (Zip code)

## 9. 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.

By: Jennifer Vincent Jenifer Vincent  
 (Registered agent's signature) Vice President & Assistant Secretary

10. 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.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 JUL 10 AM 10:34

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

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

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

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

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

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

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

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

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

B. OFFICERS

President: JAMES D PAPPAS

Address: 3825 STERN AVE ST CHARLES 60174

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

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

Secretary: CYNTHIA V PAPPAS

Address: 3825 STERN AVE ST CHARLES 60174

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

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

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

12.  \_\_\_\_\_  
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.

13. James D. Pappas President  
(Typed or printed name and capacity of person signing application)

APPROVED ( 7/7 )  
AND  
FILED

File Number 4998-694-7

14 JUL 10 AM 10:34

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*

FORM PLASTICS COMPANY, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 13, 1972, 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 #: 1417802450

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 27TH  
day of JUNE A.D. 2014 .*

*Jesse White*

SECRETARY OF STATE