F16000002670

(F	Requestor's Name)			
(<i>F</i>	Address)			
(<i>f</i>	Address)			
(0	City/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL		
· (E	Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of S	Status		
Special Instructions to Filing Officer:				

Office Use Only



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May 24, 2016

.

KAREN MILLER 496 W BOUGHTOON ROAD BOLINGBROOK, IL 60440

SUBJECT: EBERHART ACCOUNTING SERVICES, PC

Ref. Number: W16000038023

We have received your document for EBERHART ACCOUNTING SERVICES, PC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

Reurn to, If you have any questions concerning the filing of your document, please call (850) 245-6051.

Attn: Yasemin Y Sulker Regulatory Specialist II

Letter Number: 016A00010992

COVER LETTER

TO:	Programme Registration Section Division of Corporations						
SUBJ	ECT:	EBERHA	RT ACCOUNTI	NG SERVICE	S, P.C.		
	-		Name	of corporatio	n - must	include suffix	
Dear S	ir or Ma	dam:					
"Certif	icate of	Existence,"		of Good Sta	nding" a	and check are sul	act Business in Florida," bmitted to register the
Please	return al	l correspon	dence concern	ing this matte	er to the	following:	
KARE	N MILLE	R					
EBERI	HART AC	COUNTIN	G SERVICES, P	Name of C.C.	Person		
		 		Firm/Cor	npany		
496 W	BOUGH	ΓΟΝ ROAD					
BOLIN	GBROO:	K IL 60440		Addı	ress		
EXPER	RT@EAT	AXES.COM		City/State	and Zip	code	
			E-mail address	: (to be used	for futu	re annual report	notification)
For fur	ther info	rmation co	ncerning this n	natter, please	call:		
KARE	EN MILLER 630 759-5070						
	Name	of Person		Area Coo) de	Daytime Telep	phone Number
Enclose	Registr Divisio Clifton 2661 E Tallaha	ation Section of Corpo Building xecutive Cossec, FL 3	rations enter Circle			MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7
= \$70	.00 Filin	g Fee 🛚 🖸	\$78.75 Filing Certificate of			5 Filing Fee & ied Copy	□ \$87.50 Filing Fee, Certificate of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

REGISTER A FO	E WITH SECTION 607.1503, FLORIDA S REIGN CORPORATION TO TRANSACT 1			
EBERHART A	CCOUNTING SERVICES, P. Corp.		- •	
	corporation; must include "INCORPORATED," Corp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPORATION	١,,"	
(If name unavail. ILLINOIS	able in Florida, enter alternate corporate name		g business in Florida)	
2.	3	36-3996751		
	ry under the law of which it is incorporated)	(FEI number, if ap	plicable)	
4			·	
(Date	e of incorporation)	(Date of duration, if other than perpetual)		
6				
496 W BOUGHT	(SEE SECTIONS 607.1501 & 607.15 ON ROAD	n Florida, if prior to registration) 502, F.S., to determine penalty liabili	ty)	
7. BOLINGBROOK				
	(Princip	oal office address)	SVHV?	
	(Current mailir	ng address, if different)		
3. Name and stree	et address of Florida registered agent: (P.C	D. Box NOT acceptable)		
Name:	CAROL EBERHART		<u> </u>	
Office Address:	2004 S FEDERAL HWY, UNIT D-303			
	BOYNTON BEACH	33435 , Florida		
	(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.

(Registered agent's signature)

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.

11. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	***
Address:	
Director:	
Address:	
	<u> </u>
B. OFFICERS	OI NO
President: CAROL EBERHART 2004 S FEDERAL HWY, UNIT D-303	
Address:	5 4. D
BOYNTON BEACH, FL 33435	5. &
Vice President:	
Address:	
KAREN MILLER Secretary:	
575 THOMAS ROAD Address: BOLINGBROOK, IL 60440	
KAREN MILLER Treasurer:	
575 THOMAS ROAD Address: BOLINGBROOK, IL 60440	
NOTE: If necessary, you may attach an addendum to the application listing additional o	fficers and/or directors.
Signature of Director or Officer	rms that the feets stated harris
The officer or director signing this document (and who is listed in number 11 above) affi are true and that he or she is aware that false information submitted in a document to the a third degree felony as provided for in s.817.155, F.S. KAREN MILLER, CORPORATE SECRETARY	

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

File Number

5813-655-7



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that

EBERHART ACCOUNTING SERVICES, P.C., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON DECEMBER 30, 1994, 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 11TH day of MAY A.D. 2016.

Authentication #: 1613201842 verifiable until 05/11/2017
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE