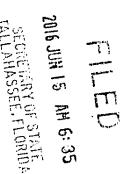
F16000002799

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Decument Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W110-43460 companies

Office Use Only



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DERVIEWS AMID: 31

K.SALY EXAMINER IUN 22 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT	NO.	•	I2000000195
TCCCOTI-	110.		TZ-00000001

REFERENCE : 180108 5010896

AUTHORIZATION : Smell of

COST LIMIT : \$C18.00

ORDER DATE: June 14, 2016

ORDER TIME : 9:41 AM

ORDER NO. : 180108-005

CUSTOMER NO: 5010896

FOREIGN FILINGS

NAME: LEOPARDO COMPANIES INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 16, 2016

RESUBMIT

CSC / MELISSA ZENDER

Please give original submission date as file date.

SUBJECT: LEOPARDO COMPANIES INC.

Ref. Number: W16000043460

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

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is L11000016590 "LEOPARDO, LLC".

Please return 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) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 616A00012634

COVER LETTER

то:	Registration Se Division of Co					
SHRI	Leopardo	Companies, Inc.				
3010	EC1:	Name	of corporation	o n - n	nust include suffix	
Dear S	ir or Madam:					
"Certif	iclosed "Applica ficate of Existend referenced foreig	ce," or "Certifica	te of Good St	andir	g" and check are sub	ct Business in Florida," emitted to register the
	return all corres	pondence concer	ning this mat	er to	the following:	
		<u> </u>	Name o	f Per	son	
Leopar	do Companies, Inc	.				
5200 P	rairie Stone Parkw	ay	Firm/Co	mpar	ру	
***************************************			Ado	lress		
Hoffma	an Estates, IL 6019	92				
			City/State	and .	Zip code	
jaoettei	@leopardo.com	F 9 . 11	(4-1	1.0		
		E-mail addre	ss: (to be used	ı tor	future annual report r	iotification)
For fur	ther information	concerning this	matter, please	call:		
Joseph	A. Oetter		847	,	783-3410	
	Name of Perso	n	at (Area Co	de	Daytime Telepl	none Number
Engloss	Registration Se Division of Cor Clifton Buildin 2661 Executive Tallahassee, FL	porations g Center Circle , 32301			MAILING AI Registration So Division of Co P.O. Box 6327 Tallahassee, F	ection prorations
	ed is a check for .00 Filing Fee	\$78.75 Filit Certificate	ng Fee &		78.75 Filing Fee & ertified 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.

(Enter name o	ompanies Inc. of corporation; must include "INCORPORATED,"	" "COMPANY," "CORPORATIO	on,"	
"Inc.," "Co.,"	"Corp," "Inc," "Co," or "Corp.")			
Leopardo	Management Services Inc.			
	ailable in Florida, enter alternate corporate name	adopted for the purpose of transac	ting business in Florida)	
Illinois 2.	3	36-3046570		
(State or cou	intry under the law of which it is incorporated)	(FEI number, if	•	
4. (D.	ate of incorporation) 5.	(Date of duration, if oth	(Date of duration, if other than perpetual)	
06/20/16 6.				
	(SEE SECTIONS 607.1501 & 607.15	n Florida, if prior to registration) 502, F.S., to determine penalty liab	pility)	
5200 Prairie St	tone Parkway, Hoffman Estates, IL 60192			
0	(Princip	oal office address)		
Same		10.3300	<u> </u>	
	(Current maili	ng address, if different)		
8 Nome and st	reet address of Florida registered agent: (P.G) Roy NOT acceptable)	2016 JUN 15 A	
o. Name and <u>st</u>	Corporation Service Company	o. Box <u>NOT</u> acceptable)		
Name:			-Ti -Ti	
Office Address:	1201 Hays Street		LOSSINE SINE 6: 30	
	Tallahassec	32301 , Florida		
	(City)	(Zip code)		
O Dogistared s	agont's accontance			
-	agent's acceptance: amed as registered agent and to accept serv.	ice of process for the above sta	ited corporation at the place	
further agree to	his application, I hereby accept the appoints o comply with the provisions of all statutes in In familiar with and accept the obligations of	relative to the proper and comp	plete performance of my	
aunes, ana x un	n juminia wan ana accept the obligations o	y my position as registered ago	Melissa Zender	
	Corporation Service Company	=1	Asst. Vice President	
	By: ///.	Kuli		
	(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:	FIL
A. DIRECTORS	2016 JUN E
Chairman:	2016 JUN 15 AM
Address:	AHASSEUFS
Vice Chairman:	
Address:	
Directors	
Address:	
Director:	
Address:	
B. OFFICERS	
James A. Leopardo, Chief Executive Officer	
5200 Prairie Stone Parkway Address:	
Hoffman Estates, Il 60192	
Richard S. Mattioda, President	······································
5200 Prairie Stone Parkway Address:	
Hoffman Estates, Il 60192	
Sal. T. Leopardo Secretary:	
5200 Prairie Stone Parkway, Hoffman Estates, IL 60192	
Address: John D. Ward Jr., Chief Financial Officer	
5200 Prairie Stone Parkway, Hoffman Estates, IL 60192 Address:	
NOTE: (Tracessary, you may attach an addendum to the application listing additional officers	and/or directors.
12. Chief Finalch official Signature of Director or Officer	
The officer of director signing this document (and who is listed in number 11 above) affirms the are true and that he or she is aware that false information submitted in a document to the Depart	at the facts stated herein
a third degree felony as provided for in s.817.155, F.S.	ment of State Constitutes
John D. Ward Jr. Chief Financial Officer	

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



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

LEOPARDO COMPANIES INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 10, 1979, 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 7TH

day of

JUNE

A.D.

2016

Authentication #: 1615901994 verifiable until 06/07/2017
Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE