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S Warren

JUN 2 2 2016

### **COVER LETTER**

TO: Registration Section Division of Corporations			
BOFA AMERICAS, INC. SUBJECT:			
	orporation ·	must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Corpor "Certificate of Existence," or "Certificate of above referenced foreign corporation to trans-	Good Stand	ling" and check are sub	
Please return all correspondence concerning t JOHN PODWOJSKI	this matter	to the following:	
	Name of P	erson	
BOFA AMERICAS, INC.			
303 S. MADISON ST.	Firm/Comp	any	
STAUNTON, IL 62088	Addres	S	
Ci JOHN.PODWOJSKI@BOFAAMERICAS.COM	ty/State an	d Zip code	
E-mail address: (to	be used fo	r future annual report r	notification)
For further information concerning this matte	r, please ca	11:	
JOHN PODWOJSKI	618	205-5007	
Name of Person at (	Area Code	Daytime Telep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
Enclosed is a check for the following amount	:		
■ \$70.00 Filing Fee □ \$78.75 Filing Fe Certificate of St		\$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

(Enter name of corporation; must include "INCORPOR	ATED," "C	OMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")		
(If name unavailable in Florida, enter alternate corporate	name ado	oted for the purpose of transacting business in Florida)
ILLINOIS		3644430
10	3	1 10 11 110
(State or country under the law of which it is incorpora 10-29-2008	ted)	(FEI number, if applicable)
	5	
(Date of incorporation)		(Date of duration, if other than perpetual)
(Date of meethoration)		(Date of curation, it officer than perpendal)
(Date of meorpolation)		(Date of duradon, it officer than perpendar)
	iness in Flo	
(Date first transacted but		orida, if prior to registration)
(Date first transacted but		
(Date first transacted but (SEE SECTIONS 607.1501 & 303 S. MADISON ST. STAUNTON, IL 62088	607.1502,	orida, if prior to registration) F.S., to determine penalty liability)
(Date first transacted but (SEE SECTIONS 607.1501 & 303 S. MADISON ST. STAUNTON, IL 62088	607.1502,	orida, if prior to registration)
(Date first transacted but (SEE SECTIONS 607.1501 & 303 S. MADISON ST. STAUNTON, IL 62088	607.1502,	orida, if prior to registration) F.S., to determine penalty liability)
(Date first transacted but (SEE SECTIONS 607.1501 & 303 S. MADISON ST. STAUNTON, IL 62088	607.1502,	orida, if prior to registration) F.S., to determine penalty liability)
(Date first transacted but (SEE SECTIONS 607.1501 & 303 S. MADISON ST. STAUNTON, IL 62088	607.1502,	orida, if prior to registration) F.S., to determine penalty liability)  ffice address)  ddress, if different)
(Date first transacted but (SEE SECTIONS 607.1501 & 303 S. MADISON ST. STAUNTON, IL 62088	c 607.1502, (Principal continued on the	orida, if prior to registration)  F.S., to determine penalty liability)  office address)  ddress, if different)
(Date first transacted but (SEE SECTIONS 607.1501 & 303 S. MADISON ST. STAUNTON, IL 62088  (Current	(Principal of mailing a	orida, if prior to registration)  F.S., to determine penalty liability)  office address)  ddress, if different)
(Date first transacted but (SEE SECTIONS 607.1501 & 303 S. MADISON ST. STAUNTON, IL 62088  (Current	(Principal of mailing a	orida, if prior to registration)  F.S., to determine penalty liability)  office address)  ddress, if different)
(Date first transacted but (SEE SECTIONS 607.1501 & 303 S. MADISON ST. STAUNTON, IL 62088  (Current	(Principal of mailing a	orida, if prior to registration)  F.S., to determine penalty liability)  office address)  ddress, if different)  ox NOT acceptable)  Research, Ltd.
(Date first transacted but (SEE SECTIONS 607.1501 & 303 S. MADISON ST. STAUNTON, IL 62088  (Current  Name and street address of Florida registered agen  Name: National Corpo  ffice Address: 115 N. Calho	(Principal of mailing a state (P.O. E	orida, if prior to registration)  F.S., to determine penalty liability)  office address)  didress, if different)  Ox. NOT acceptable)  Research, Ltd. F. STAR  A, Surte 4
(Date first transacted but (SEE SECTIONS 607.1501 & 303 S. MADISON ST. STAUNTON, IL 62088  (Current  Name and street address of Florida registered agen  Name: National Corpo  ffice Address: 115 N. Calho	(Principal of mailing a state (P.O. E	orida, if prior to registration)  F.S., to determine penalty liability)  office address)  ddress, if different)  ox NOT acceptable)  Research, Ltd. Fistard, Ltd. Fistard, Ltd. Fistard, Ltd. Fistard, Ltd. Fistard, Ltd. Fistard, Surfection Based on Salary Started Salary Started Salary Salar
(Date first transacted but (SEE SECTIONS 607.1501 & 303 S. MADISON ST. STAUNTON, IL 62088  (Current  Name and street address of Florida registered agen  Name: National Corpo  ffice Address: 115 N. Calho	(Principal of mailing a state (P.O. E	orida, if prior to registration)  F.S., to determine penalty liability)  office address)  ddress, if different)  ox NOT acceptable)  Research, Ltd. 1

A Brittany Tollincki - Oristant Secretary of NCR

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.

duties, and I am familiar with and accept the obligations of my position as registered agent.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: \_\_\_\_\_ Address: \_\_\_\_ Vice Chairman: Address: \_\_\_\_ Director: Address: Director: **B. OFFICERS** JOHN PODWOJSKI President: 121 S TIMBERVIEW U Address: STAUNTON, IL 62088 Vice President: ANNIE PODWOJSKI Secretary: 121 S TIMBERVIEW STAUNTON, IL 62088 Address: 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 11 above) affirms that the facts stated herein

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

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.

JOHN PODWOJSKI, PRESIDENT

#### File Number

6631-730-7



## 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

BOFA AMERICAS, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 29, 2008, 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

day of JUNE A.D.2016

Authentication #: 1616000640 verifiable until 06/08/2017 Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE