

F16000003494

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

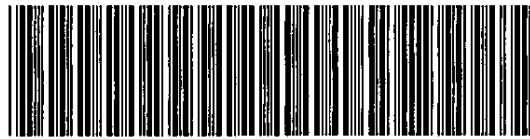
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2016 AUG -4 P 1:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

S Warren

AUG 05 2016

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Symbria, Inc.

\_\_\_\_\_  
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:

Mallory Nicholas

\_\_\_\_\_  
Name of Person

Symbria, Inc.

\_\_\_\_\_  
Firm/Company

28100 Torch Parkway Suite 600

\_\_\_\_\_  
Address

Warrenville, IL 60555

\_\_\_\_\_  
City/State and Zip code

mnicholas@symbria.com

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

For further information concerning this matter, please call:

Mallory Nicholas

at ( 630 ) 413-5800

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

### MAILING ADDRESS:

Registration 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

**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.*

Symbria, Inc.

1. \_\_\_\_\_  
(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. 36-4297908  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1/20/1999 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)
6. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 28100 Torch Parkway Suite 600, Warrenville, IL 60555  
(Principal office address)

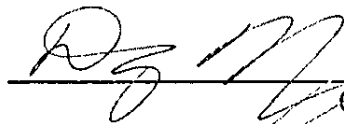
\_\_\_\_\_  
(Current mailing address, if different)

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

Name: C T 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.*



Dang Nguyen, Asst. Secretary, C T Corporation System

(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.

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2017-03-04 P 1:05  
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TALLAHASSEE, FLORIDA

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

**A. DIRECTORS**

- Chairman: Jim Hussey  
Address: 28100 Torch Parkway Suite 600, Warrenville, IL 60555
- Vice Chairman: Duane Tyler  
Address: 28100 Torch Parkway Suite 600, Warrenville, IL 60555
- Director: Jill M. Krueger  
Address: 28100 Torch Parkway Suite 600  
Warrenville, IL 60555
- Director: Please see attached list.  
Address: \_\_\_\_\_

**B. OFFICERS**

- President: Jill M. Krueger  
Address: 28100 Torch Parkway Suite 600  
Warrenville, IL 60555
- Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_
- Secretary: James Stark  
Address: 28100 Torch Parkway Suite 600, Warrenville, IL 60555
- Treasurer: James Stark  
Address: 28100 Torch Parkway Suite 600, Warrenville, IL 60555

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

12. Jill M. Krueger  
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 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. Jill M. Krueger, President & CEO  
(Typed or printed name and capacity of person signing application)

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2018 JUN -4 P 1:05  
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TALLAHASSEE, FLORIDA



28100 Torch Parkway, Suite 600  
Warrenville, IL 60555  
(630) 413-5800

**Board of Directors Contact  
Information**

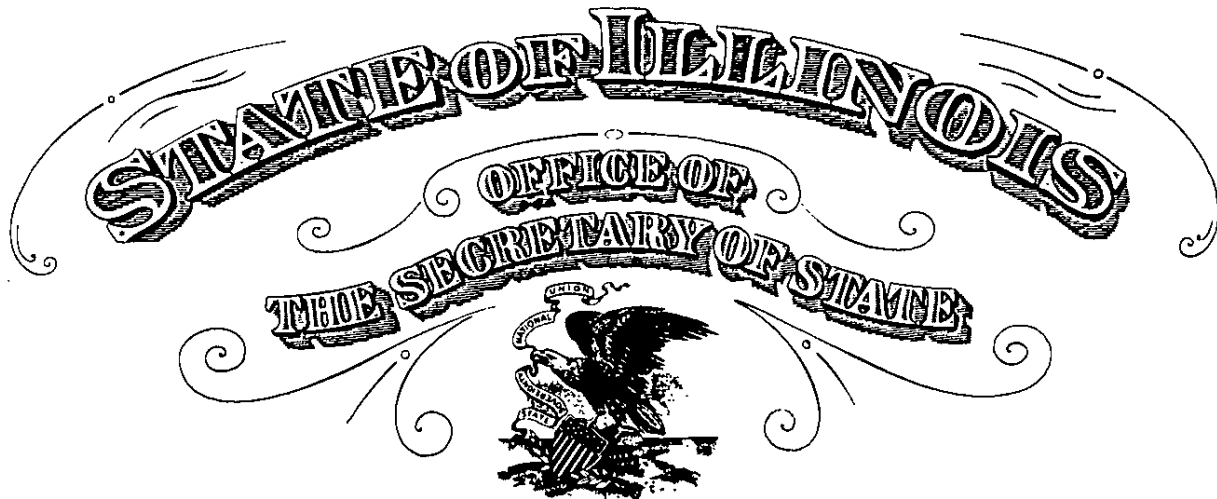
**November 2015**

Board Member Contact Information	Board Position
Cochrane, Lisa	Director
Hussey, Jim	Director Chairperson
Krueger, Jill	Director
Lumpp, Roger	Director
Stark, James	Director Secretary/Treasurer
Tyler, Duane	Director Vice Chairperson
Weiss, Albert	Director

**FILED**  
2015-11-11 P 1:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

File Number

6030-869-1



***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***

SYMBRIA, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 20, 1999, 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 22ND  
day of JUNE A.D. 2016 .***

*Jesse White*

SECRETARY OF STATE