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(Requ	estor's Name)			
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PICK-UP	WAIT MAIL			
(Busir	ness Entity Name)			
(Docu	ment Number)			
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 26, 2016

THOMAS J. DWYER JR 401 S. LASALLE ST., STE 606 CHICAGO, IL 60605

SUBJECT: R.T. NELSON & ASSOCIATES, LLC

Ref. Number: W16000059474

We have received your document for R.T. NELSON & ASSOCIATES, LLC 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 listed in number one of the application must be identical to the name listed in the certificate of existence.

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.

Tanisha L Washington Regulatory Specialist II

Letter Number: 516A00018277

Mp 25 12 PH W. 24

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.

R. T. NELSON & ASSOCIATES, LTD. INC (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")						
	-R. T. NELSON	INC.				
2.	ILLINOIS	able in Florida, enter alternate corporate na		opted for the purpose of transacting business in Florida) 6-3571931		
4.	(State or country 04/01/1988	y under the law of which it is incorporated)	·	(FEI number, if applicable)		
4. (Date of incorporation) N/A 6.			J,	(Date of duration, if other than perpetual)		
7.	903 COMMERC	(SEE SECTIONS 607.1501 & 60 E DRIVE, SUITE 150, OAK BROOK, IL	7.1502 50523 	lorida, if prior to registration) , F.S., to determine penalty liability) office address)		
		(Current m	ailing	address, if different)		
8.	Name and stree	et address of Florida registered agent: (CT CORPORATION SYSTEM	(P.O.		FILED	
O	ffice Address:	1200 SOUTH PINE ISLAND ROAD		- C. FLORID.	Ų	
		PLANTATION (City)		, 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.

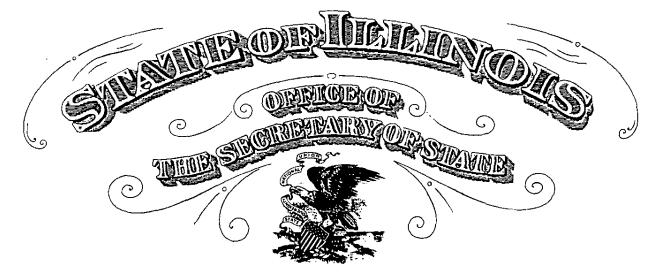
James M. Halpin
Assistant Secretary

(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: Director: _ Address: Director: **B. OFFICERS** JAMES NELSON President: 903 COMMERCE DRIVE, SUITE 150 Address: _ OAK BROOK, IL 60523 WILLIAM TODD NELSON Vice President: 903 COMMERCE DRIVE, SUITE 150 Address: _ OAK BROOK, IL 60523 Secretary: __ The state of the s 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 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. JAMES NELSON - PRESIDENT

(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

R. T. NELSON & ASSOCIATES, LTD., A DOMESTIC CORPORATION, INCORPORATED TO UNDER THE LAWS OF THIS STATE ON MARCH 23, 1988, APPEARS TO HAVE COMPLETED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS EXECUTE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE OF ILLINOIS.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 5TH day of AUGUST A.D. 2016.

Authentication #: 1621802480 verifiable until 08/05/2017 Authenticate at: http://www.cyberdriveillinois.com Desse White

SECRETARY OF STATE