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(Re	questor's Name)			
(Ad	dress)			
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 9, 2016

JACK ROSENFELD 1310 LOUIS AVE ELK GROVE VILLAGE, IL 60007

SUBJECT: INTERNATIONAL PROMOTIONAL IDEAS, INC.

Ref. Number; W16000057896

We have received your document for INTERNATIONAL PROMOTIONAL IDEAS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return the corrected original and one copy of 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.

Octavia I Simmons Regulatory Specialist II Registration Section

Letter Number: 716A00019003



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 22, 2016

JACK ROSENFELD 1310 LOUIS AVE ELK GROVE VILLAGE, IL 60007

SUBJECT: INTERNATIONAL PROMOTIONAL IDEAS, INC.

Ref. Number: W16000057896

We have received your document for INTERNATIONAL PROMOTIONAL IDEAS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return the corrected original and one copy of 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.

Octavia I Simmons Regulatory Specialist II Registration Section

1

Letter Number: 316A00017672

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: International Pronotional Ideas, 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:				
Jack Bose NFald Name of Person				
International Pronotional Tolean Firm/Company				
1310 Louis Ava.				
Elk Grove Village, IL 6007 City/State and Zip code				
City/State and Zip code				
E-mail address (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Tack Rosewfeld at (847) 439-6760 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 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.

	corporation; must include "INCORPORATED," "Corp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"	
(If name unava	ilable in Florida, enter alternate corporate name ado	pted for the purpose of transacting busine	ess in Florida)
Illinois	36	6-3933277	
1/1/94	try under the law of which it is incorporated) 5.	. , , , , , , , , , , , , , , , , , , ,	
	te of incorporation)	(Date of duration, if other than perpetual)	
1310 Louis Avo	(Date first transacted business in Flo (SEE SECTIONS 607.1501 & 607.1502, cnue, Elk Grove Villiage, 1L 60007		
	(SEE SECTIONS 607.1501 & 607.1502, enue, Elk Grove Villiage, 1L 60007		16 S
1310 Louis Ave	(SEE SECTIONS 607.1501 & 607.1502, enue, Elk Grove Villiage, 1L 60007 (Principal o	F.S., to determine penalty liability)	16 SEP 29
1310 Louis Ave	(SEE SECTIONS 607.1501 & 607.1502, enue, Elk Grove Villiage, 1L 60007 (Principal o	F.S., to determine penalty liability) office address) ddress, if different)	DIVISION OF COREC
1310 Louis Ave	(SEE SECTIONS 607.1501 & 607.1502, cnue, Elk Grove Villiage, 1L 60007 (Principal of Current mailing a	F.S., to determine penalty liability) office address) ddress, if different)	DIVISION OF CONTURNIT
1310 Louis Ave	(SEE SECTIONS 607.1501 & 607.1502, enue, Elk Grove Villiage, 1L 60007 (Principal of Current mailing a eet address of Florida registered agent: (P.O. E	F.S., to determine penalty liability) office address) ddress, if different)	SEP 29 AH
1310 Louis Ave	(SEE SECTIONS 607.1501 & 607.1502, cnue, Elk Grove Villiage, 1L 60007 (Principal of Current mailing a eet address of Florida registered agent: (P.O. E. Corporation Service Company	F.S., to determine penalty liability) office address) ddress, if different)	DIVISION OF CONTORNIONS

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.

> Holly Jones Assistant Vice President Corporation Service Company (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:	
	0
Director:	6 SEP
Address:	U
	300 M
Director:	9 AM IO: 25
Address:	: 25
	· · · · · · · · · · · · · · · · · ·
B. OFFICERS	
President: Jack Rose ofeld	`
Elk Grova Villaga, IL 60007.	
Vice Président:	
Address:	
Secretary: Jack 8052 WELD	
Address: 1310 Louis Ava Elk Grova Villag	10 DL 60007
Тгеазигет:	,
Address:	
NOTE: If necessary, you may attach an addendum to the application listing additional offic	ers and/or directors.
12.	
Signature of Director or Officer The officer and instantial and the inlies of the second seco	41.44.6.4.4.4.1
The officer or director signing this document (and who is listed in number 11 above) affirms are true and that he or she is aware that false information submitted in a document to the Department degree felony as provided for in s.817.155, F.S.	
13. Jack Rosenfeld	
(Typed or printed name and capacity of person signing application)	·

File Number

5765-088-5



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

INTERNATIONAL PROMOTIONAL IDEAS, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 24, 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 28TH day of SEPTEMBER A.D. 2015.

Authentication #: 1527102682 verifiable until 09/28/2016
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE