

File 00005476

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (855)330-1010

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FOREIGN PROFIT/NONPROFIT CORPORATION
FUTUREVISION, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

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2016 DEC 12 PM 12:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 13 2016
J. HARRIS

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FICTITIOUS NAME RESOLUTION

I, Matt Kovarik, President of FUTUREVISION, INC., a Florida corporation, acting on behalf and after a vote of the Board of Directors, authorize use of the fictitious name FUTUREVISION (ILLINOIS), INC. for use in the State of Florida.

Dated this 12th day of December, 2016.

A handwritten signature in cursive script, appearing to read "Matt Kovarik", is written over a horizontal line.

Matt Kovarik, President

FUTUREVISION, INC.
5226 Blodgett Ave
Downers Grove, IL 60515

**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.*

FUTUREVISION, INC.

1.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

FUTUREVISION (ILLINOIS), INC.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

ILLINOIS

N/A

2.

(State or country under the law of which it is incorporated)

06/20/2002

3.

(FEI number, if applicable)

4.

(Date of incorporation)

N/A

5.

(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)

3030 N. ROCKY POINT DRIVE, SUITE 150A, TAMPA, FL 33607

7.

(Principal office address)

5226 BLODGETT AVE, DOWNERS GROVE, IL 60515

(Current mailing address, if different)

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

Name:

REGISTERED AGENTS INC.

Office Address:

3030 N. Rocky Point Drive, STE 150A

TAMPA

(City)

Florida

33607

(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.

Bill Havre

Bill Havre/Secretary/Registered Agents Inc.

(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.

15 DEC 12 AM 9:25

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: MATT KOVARIK

Address: 5226 BLODGETT AVE, DOWNERS GROVE, IL 60515

Director: 5226 BLODGETT AVE, DOWNERS GROVE, IL 60515

Address: _____

B. OFFICERS

President: MATT KOVARIK

Address: 5226 BLODGETT AVE, DOWNERS GROVE, IL 60515

Vice President: _____

Address: _____

Secretary: TIM MAHONEY

Address: 5226 BLODGETT AVE, DOWNERS GROVE, IL 60515

Treasurer: MATT KOVARIK

Address: 5226 BLODGETT AVE, DOWNERS GROVE, IL 60515

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

12. Matt Kovarik _____

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. MATT KOVARIK, PRESIDENT _____

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

FILED
NOV 12 4:11 PM '05
15 DEC 12 4:11 PM '05

File Number

6229-327-6



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

FUTUREVISION, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JUNE 20, 2002, 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 8TH
day of DECEMBER A.D. 2016 .

Authentication #: 1634301892 verifiable until 12/08/2017
Authenticate at: <http://www.cyberdriveillinois.com>

Jesse White

SECRETARY OF STATE