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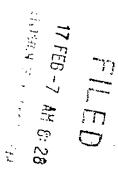
(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 27, 2017

WILLIAM CHMELIK 735 HUNTER DR BATAVIA, IL 60510

SUBJECT: COMMUNICATIONS DIRECT, INC

Ref. Number: W17000007903



We have received your document for COMMUNICATIONS DIRECT, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia I Simmons Regulatory Specialist II

Letter Number: 317A00001714

COVER LETTER

TO:	Registration Sec Division of Cor				
SUB	ГЕСТ:	COMMUNIC	LATION	5 Direct	, INC _
		Name of corpor	ation - must	include suffix	
Dear	Sir or Madam:				
"Cert	ficate of Existenc	ion by Foreign Corporation e," or "Certificate of Good n corporation to transact b	Standing" a	nd check are sub	
Please	return all correst	ondence concerning this n	natter to the f	following:	
	(1)	Win I C	Lmel	K	
		Man J. C	e of Person		
(CMMUN	ICATIONS T	PIRST	INC	
		Firm			
	735	HUNTER D A IL G City/S	TIVE		
		<u> </u>	Address		
_	BATAVI	A J.L	50510		
		City/S	ate and Zip	code	
	bille	E-mail address: (to be	ect.	COM	
		E-mail address: (to be	ised for futur	re annual report r	notification)
For fu	urther information	concerning this matter, ple	ease call:		
		n Area		06-540 Daytime Telep	hone Number
	STREET/COL Registration Se Division of Co Clifton Buildin 2661 Executive Tallahassee, Fl	rporations g : Center Circle		MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7
Enclo	sed is a check for	the following amount:			
5 \$7	70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status		5 Filing Fee & fied 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.

~ .	-14	Florida INC	
	<u>.</u>	dopted for the purpose of transacting business	in Florida)
2. <u>TLL, NOIS'</u> (State or country under the law of w	3	(FEI number, if applicable)	
		- ·	
(Date of incorporation)	5	(Date of duration, if other than perpetual)	
6. JAJUATY / (Date	first transacted business in I	Florida, if prior to registration)	
		7)2, F.S., to determine penalty liability) T F BATAVIA IC	60510
	(Principa	al office address)	
	(Current mailing	g address, if different)	
8. Name and street address of Florid	a registered agent: (P.O.	. Box NOT acceptable)	T FEB
Name: REGISTE	RED AGENT S	slutions, INC	B - 7
	E Plaza Dr.		= 1
TAILALAS.	se_	, Florida <u>32301</u> (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.

Jaclyn Wright, Asst. 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; _______ Vice Chairman: Address: Address: _____ B. OFFICERS President: Timothy Robert, VAN HIE!

Address: 735 HUNTER DrivE UNIT F Vice President: Address: _____ Secretary: William J. ChmEl.K Address: 735 HUNTER Drive UNIT F BATEVIA IL 60510 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.

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

File Number

5597-921-9



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

COMMUNICATIONS DIRECT, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MAY 29, 1990, 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 6TH day of FEBRUARY A.D. 2017 .

Authentication #: 1703701614 verifiable until 02/06/2018

Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE