

FI70000002967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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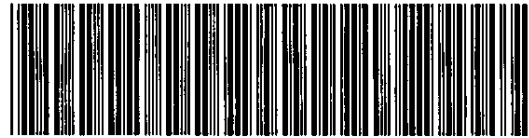
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/27/17--01025--019 **78.75

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- SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT
JUL 3 2017



Cornerstone Support, Inc.

LICENSING • INSURANCE • COMPLIANCE

Florida Division of Corporations
New Filing Section/Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

June 20, 2017

Florida Division of Corporations,

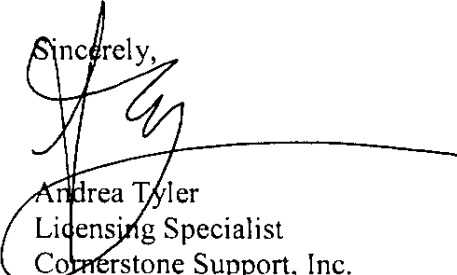
Please find enclosed the certificate of authority application and filing fee for Quad Corporation, Inc. They have hired Cornerstone Support, Inc. to file this on their behalf. I have provided a stamped self-addressed envelope for return proof of filing for your convenience. If you have any questions, please feel free to call me at (678) 740-0499 or email me at atylar@cornerstonesupport.com.

Please mail any correspondence to:
Cornerstone Support, Inc.
Attn: Andrea Tyler
70 Mansell Court, Suite 250
Roswell, GA 30076

CONFIDENTIALITY NOTICE

This submission and any attachments contain information from Cornerstone Support, Inc. and are intended solely for the use of the named recipient or recipients. This submission may contain privileged or confidential communications. Any dissemination of this submission by anyone other than an intended recipient is strictly prohibited. If you are not a named recipient, you are prohibited from any further viewing of the information any attachments or from making any use of the information or attachments. If you believe you have received this information in error, notify the sender immediately and permanently destroy the information, any attachments, and all copies thereof.

Sincerely,


Andrea Tyler
Licensing Specialist
Cornerstone Support, Inc.

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Quad Corporation, 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:

Andrea Tyler
Name of Person
Cornerstone Support, Inc.
Firm/Company
70 Mansell Court, Suite 250
Address
Roswell, GA 30076
City/State and Zip code
mmeyer@quad-corp.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Andrea Tyler at (770) 587-4595
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.*

1. Quad Corporation, Inc.

(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. IA 3. 42-1179734
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 08/15/1977 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. upon qualification

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2322 East Kimberly Road Suite 150E Davenport IA 52807
(Principal office address)

PO Box 2020 Davenport IA 52807

(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301
(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, 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.



**Carrie Pugh
Asst Vice President**

(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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SECRETARY OF STATE

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Thomas Yeggy

Address: 2322 East Kimberly Road Suite 150E
Davenport, IA 52807

Vice President: _____

Address: _____

Secretary: Mark Meyer

Address: 2322 East Kimberly Road Suite 150E Davenport, IA 52807

Treasurer: Melissa DeClerck

Address: 2322 East Kimberly Road Suite 150E Davenport, IA 52807

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HALL COUNTY

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

12. Thomas Yeggy _____
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. Thomas Yeggy _____

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

6/20/2017

Certificate of Standing

**IOWA SECRETARY OF STATE
PAUL D. PATE**



CERTIFICATE OF EXISTENCE

Date: 6/20/2017

Name: QUAD CORPORATION, INC. (490 DP - 33360)

Date of Incorporation: 8/15/1977

Duration: PERPETUAL

I, Paul D. Pate, Secretary of State of the State of Iowa, custodian of the records of incorporations, certify the following for the corporation named on this certificate:

- a. The entity is in existence and duly incorporated under the laws of Iowa.
- b. All fees required under the Iowa Business Corporation Act due the Secretary of State have been paid.
- c. The most recent biennial report required has been filed with the Secretary of State.
- d. Articles of dissolution have not been filed.

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IOWA SECRETARY OF STATE
DES MOINES, IOWA

Certificate ID: **CS136868**

To validate certificates visit:

sos.iowa.gov/ValidateCertificate

A handwritten signature of Paul D. Pate in black ink.

Paul D. Pate, Iowa Secretary of State