

F17000003420

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

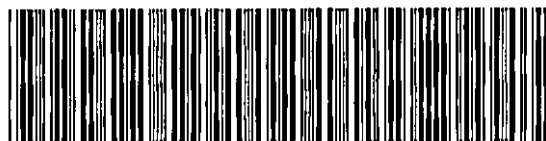
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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115 N CALHOUN ST., STE. 4
 TALLAHASSEE, FL 32301
866.625.0838
 COGENCYGLOBAL.COM

Date: 8/1/2017

Account#: 120000000088

Name: **KENDALL HOWELL**

Reference #: **G034885**

Entity Name: **TRACER REPAIR & OVERHAUL, INC.**

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

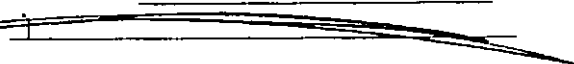
☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other **** CERTIFIED COPY UPON FILING ****

**ISSUES - CALL KEN @
 518-213-0738**

Authorized Amount: **\$78.75**

Signature: 

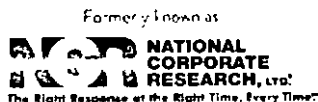
CORPORATE HQ
 COGENCY GLOBAL INC
 10 E 40TH ST, 10TH FL
 NY, NY 10016
 800.221.0102
 +1.212.947.7200

EUROPEAN HQ
 COGENCY GLOBAL (UK) LIMITED
 REGISTERED IN ENGLAND & WALES
 REGISTRARS - GIG/2
 6 BEVIS MARKS, 1ST FL
 LONDON EC3A 7BA
 +44 (0)20.3786.1090

ASIA PACIFIC HQ
 COGENCY GLOBAL (HK) LIMITED
 A HONG KONG LIMITED COMPANY
 INFINITUS PLAZA, 12TH FL
 199 DES VOEUX RD CENTRAL
 HONG KONG
 +852.3975.1803



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115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Date: 8/1/2017

Account#: I20000000088

Name: KENDALL HOWELL

Reference #: G034885

Entity Name: TRACER REPAIR & OVERHAUL, INC.

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☐ Fictitious Name

☒ Other ** CERTIFIED COPY UPON FILING **

ISSUES - CALL KEN @
518-213-0738

Authorized Amount: \$78.75

Signature: [Signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tracer Repair & Overhaul, 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:

Leslie Schmidt

Name of Person

Freeborn & Peters LLP

Firm/Company

211 South Wacker Drive, Suite 3000

Address

Chicago, IL 60606

City/State and Zip code

lschmidt@freeborn.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leslie Schmidt

Name of Person

at (312)

Area Code

360-6000

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. Tracer Repair & Overhaul, 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. ILLINOIS 3. 36-3913467
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. FEBRUARY 18, 1993 5. _____
(Date of incorporation) (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)
7. 3225 Gateway Road, Ste. 600, Brookfield, WI 53045
(Principal office address)

(Current mailing address, if different)

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

Name: COGENCY GLOBAL INC.

Office Address: 115 N Calhoun Street, Suite 4
Tallahassee, Florida 32301
(City) (Zip code)

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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.

Brian Connerly, Asst Secy COGENCY GLOBAL 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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: William D. Morales

Address: 3225 Gateway Road, Ste. 600, Brookfield, WI 53045

Director: _____

Address: _____

B. OFFICERS

President: William D. Morales

Address: 3225 Gateway Road, Ste. 600, Brookfield, WI 53045

Vice President: _____

Address: _____

Secretary: William D. Morales

Address: 3225 Gateway Road, Ste. 600, Brookfield, WI 53045

Treasurer: William D. Morales

Address: 3225 Gateway Road, Ste. 600, Brookfield, WI 53045

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

12. William D. Morales 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.

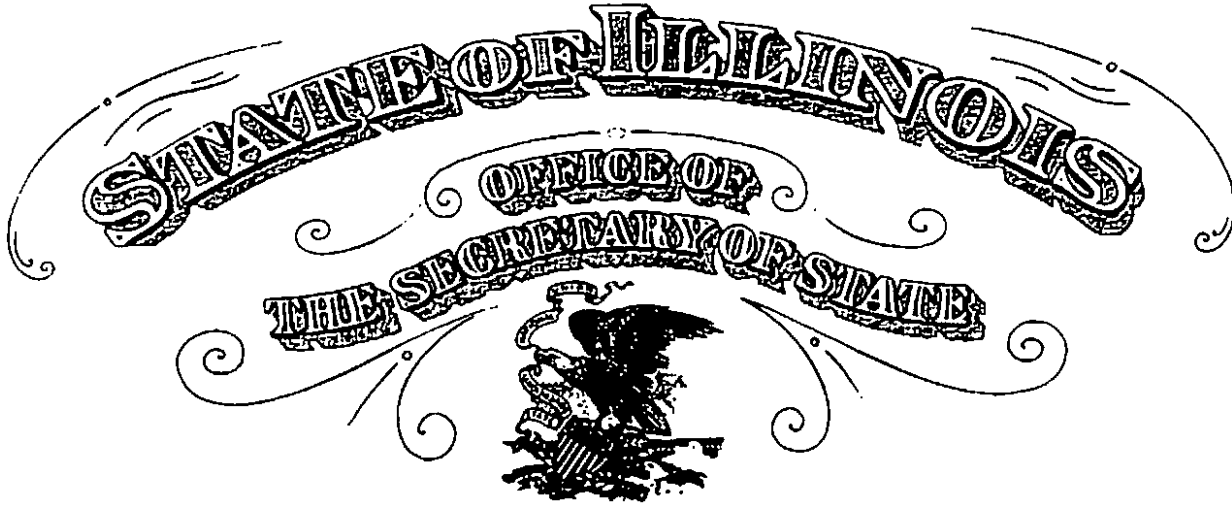
13. William D. Morales, President

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

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MILWAUKEE, FLORIDA

File Number

5718-988-6



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

TRACER REPAIR & OVERHAUL, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON FEBRUARY 18, 1993, 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 1ST
day of AUGUST A.D. 2017 .***

Jesse White

SECRETARY OF STATE