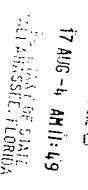
(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ddress)			
(Ci	ty/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Bo	usiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



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Y SULKER

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 747574 4321040

AUTHORIZATION AUTHORIZATION COST LIMIT : \$ 76.00

ORDER DATE : July 31, 2017

ORDER TIME : 11:39 AM

ORDER NO. : 747574-005

CUSTOMER NO: 4321040

FOREIGN FILINGS

NAME: JR INNOVATIONS INC.

CONTACT PERSON: Roxanne Turner -- EXT# 62969

\_\_\_\_ CERTIFICATE OF GOOD STANDING

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

EXAMINER:

### **COVER LETTER**

TO:	Registration Se			
	Division of Co	•		
SUBJ	ECT:	JR Innovations Inc.		
		Name of corporat	ion - must include suf	fix
Dear S	Sir or Madam:			
"Certi	ficate of Existen	ition by Foreign Corporation in ce," or "Certificate of Good S gn corporation to transact bus	tanding" and check a	
Please	return all corres	pondence concerning this ma	tter to the following:	
Carlen	C. Sellers			
		Name	of Person	
Schiff	Hardin LLP			
		Firm/C	ompany	<del></del>
233 S.	Wacker Drive, Sta	e. 7100		
	·	Ad	ldress	
Chicag	go, IL 60606-6446			
		City/Stat	e and Zip code	
mgalo(	@schifthardin.com	n		
		E-mail address: (to be use	ed for future annual re	port notification)
For fu	rther information	concerning this matter, pleas	se call:	
Carlen	C. Sellers	312 at (	258-4526	
	Name of Perso			Telephone Number
	STREET/COU Registration So Division of Co Clifton Buildin 2661 Executive Tallahassee, FI	rporations ng e Center Circle	Registrat Division P.O. Box	NG ADDRESS: tion Section of Corporations 6 6327 see, FL 32314
Enclos	ed is a check for	the following amount:		
☐ <b>\$</b> 70	0.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fe Certified Copy	e &   \$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 unavail	able in Florida, enter alternate corporate name a	dopted for the purpose of transacting busi	ness in Florida)
Illinois		82-0953113	
(State or countr 3/23/2017	ry under the law of which it is incorporated)	(FEI number, if applicab	<u>.</u>
(Date	e of incorporation)	(Date of duration, if other than p	erpetital)
SOOO N. Sheridan	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15 n Road, Apt. 303, Chicago, IL 60640	Florida, if prior to registration) 02, F.S., to determine penalty liability)	AM AM
	<u> </u>	al office address)	11:49 8:18:19:49
Name and stree	(Current mailin  et address of Florida registered agent: (P.C  Corporation Service Company	g address, if different)    Box NOT acceptable)	
Name:	1201 Hays Street		
ffice Address:	Tallahassee	32301 , Florida	
	(City)	(Zip code)	
aving been nan signated in this rther agree to c	ent's acceptance: ned as registered agent and to accept servi s application, I hereby accept the appointn comply with the provisions of all statutes re familiar with and accept the obligations of	nent as registered agent and agree to elative to the proper and complete per f my position as registered agent.	act in this capacity erformance of my
_	Corporation Service Company  By:	Melissa Zender Asst. Vice Preside	
_	(Registered a	gent'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 James Kornacki Chairman: 5009 N. Sheridan Road, Apt. 303, Chicago, IL 60640 Address: Vice Chairman: \_\_\_\_\_ Address: \_ Director: \_\_ Address: \_\_\_\_ Address: **B. OFFICERS** James Komacki 5009 N. Sheridan Road, Apr. 303, Chicago, IL 60640  $iT_{i}$ Vice President: Address: \_ James Komacki 5009 N. Sheridan Road, Apt. 303, Chicago, IL 60640 Address: Treasurer: \_\_ NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The office 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. James Kornacki, President

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

### File Number

7109-571-1



## 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

JR INNOVATIONS INC.. A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 22, 2017, 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 31ST day of JULY A.D. 2017.

Authentication #: 1721201624 verifiable until 07/31/2018

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

Desse White

SECRETARY OF STATE