## F170000003948

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer: 8/31/17 Alternate Name per Jorathy I Serrar						

Office Use Only



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S. WARREN AUG 3 1 2017

## **COVER LETTER**

10:	Division of Co					
SDRI	ECT:		Serrano (	"amardian		
SUBJECT: Serrano Corporation  Name of corporation - must include suffix						
Dear S	Sir or Madam:					
"Certi	ficate of Existent	tion by Foreign Corpo ce," or "Certificate of ( gn corporation to trans	Good Star	nding" and check are sub	nct Business in Florida," comitted to register the	
Please	return all corres	pondence concerning t	his matter	r to the following:		
		Jo	nathan Se	rrano		
			Name of	Person		
		Sc	rano Com	oration		
			Firm/Com			
		501	8 W Armi	tage Ave		
	· • · · ·		Addro			
			Chicago, II	L 60639		
				nd Zip code		
		ice manual	n Description	JSE:	RZANO OSERZANO	MEDINGROU
	•••	E-mail address: (to	be used t	for future annual report	notification)	cor
For fu	ther information	concerning this matte	r, please o	call:		
	Jonathan Serran		77 <u>3</u>			
	Name of Perso	on	Area Cod	e Daytime Telep	hone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle				MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	Tallahassee, FI			i ananassee, i	L 32314	
Enclos	ed is a check for	the following amount				
□ \$70	0.00 Filing Fee	☐ \$78.75 Filing Fe Certificate of St		\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certificate of Status of 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. Serrano Cornora				
(Enter name of co	orporation; must include "I orp," "Inc," "Co," or "Corp	NCORPORATED	o," "COMPANY," "CORPORATION,"	
			2	
SERRI	AND MEDIAL	_GPOUP/	e) Cerrano Mec	tia Group II
(If name unavaila	able in Florida, enter altern	ate corporate name	adopted for the purpose of transacting bu	
3		2	81-3691929	
2. ILLINOIS LISA	y under the law of which it	is incorporated)	(FEI number, if application	able)
08/27/2016	,	,	PERPETUAL	
4	of incorporation)	5	(Date of duration, if other than	
(Date	of incorporation)		(Date of duration, if other than	perpetual)
6				
			in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	
5018 W Armitage	: Ave. Chicago, IL 60639		• • •	70 May 1
7		ILL	BRICKELL AVE., SUITE	- 730, MAMI, F
		(Princ	ipal office address)	2313
		(Current mail	ing address, if different)	72 SA 7
8. Name and stree	t address of Florida regi	stered agent: (P.	O. Box NOT acceptable)	元の
Name:	Jonathan Serrano			29 TARY (
i tuille.	1221 Brickell Ave, SUI	TT: 730	<del></del>	
Office Address:	TEET WICKELL AVE, GOT			FL(S)
	Miami		33131	
	(Cit	v)	, Florida (Zip code)	
	(	3,	(2.1) 2332,	
9. Registered age				
			vice of process for the above stated co tment as registered agent and agree to	
			relative to the proper and complete p	
duties, and I am fo	amiliar with and accept	the obligations	of my position as registered agent.	•/
		Jan	Dan John	
		(Kegistered	l 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 Jonathan Serrano Chairman: 5018 W Annitage Ave Address: Chicago, IL 60639 Vice Chairman: Address: Director: Address: \_\_\_ **B. OFFICERS** Jonathan Serrano President: 5018 W Armitage Ave Address: Chicago, IL 60639 Vice President: Address: \_\_\_ Secretary: \_ 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 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. Jonathan Serrano, President and CEO (Typed or printed name and capacity of person signing application)



## 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

SERRANO CORPORATION, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON AUGUST 27, 2016, 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 23RD day of AUGUST A.D. 2017.

Authentication #: 1723503296 verifiable until 08/23/2018
Authenticate at: http://www.cyberdriveillinois.com

esse White