F18000001769

(Requestor's Name)				
(Address)				
(Address)				
(O) - (O) (7) - (D) (4)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
W18-31869 DBA				

Office Use Only



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THE APR IS PH 4: 09
SECRETARY OF STATE

K. SALY APR 16 2018

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: MV21 INC. DRA F	iorida Restoration 21			
	- must include suffix			
Dear Sir or Madam:				
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Stan above referenced foreign corporation to transact busine	ding" and check are submitted to register the			
Please return all correspondence concerning this matter	to the following:			
Mark Dow	mnenko			
Name of				
MV21				
Firm/Com	pany			
21W301 Lake S-	t.			
Addre				
Addison, IL (00101			
City/State a				
mdomnankt	a @ email cana			
E-mail address: (to be used i	for future annual report notification)			
For further information concerning this matter, please of	rall:			
To ratale mornation concerning and matter, prease c				
Mark Domnenko at (630) 440.8001			
Name of Person Area Code Daytime Telephone Number				
	•			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, FL 32314			
Tallahassee, FL 32301	Tallallassee, FL 32314			
Enclosed is a check for the following amount:				
\$\$ \$70.00 Filing Fee \$\simega\$ \$78.75 Filing Fee & Certificate of Status	1 \$78.75 Filing Fee & ☐ \$87.50 Filing Fee, Certified Copy ☐ 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.	(Enter name of corporation; must include "INCORPORA" Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	ATED," "(COMPANY, "CORPORATION,"	
	(If name unavailable in Florida, enter alternate corporate		_	ousiness in Florida)
2.	Illinois	3	300 502 818	
	(State or country under the law of which it is incorporated) (FEI number, if applicable)			,
4.	08.20.2008	5	n/a	
	(Date of incorporation)		(Date of duration, if other the	an perpetual)
6.	N/A			
7	(SEE SECTIONS 607.1501 &	: 607.1502, . みよ	orida, if prior to registration) F.S., to determine penalty liability A(Son, 16 GO) office address)	
		nt mailing a	ddress, if different)	
	Name and street address of Florida registered ager Name: Mark Domnanko ffice Address: LOIDO Lake Ella Orlando (City)	enor I	Box NOT acceptable)	FILED 8 APR 13 PM 4: 10 SECRETARY OF STATE FILORIDA

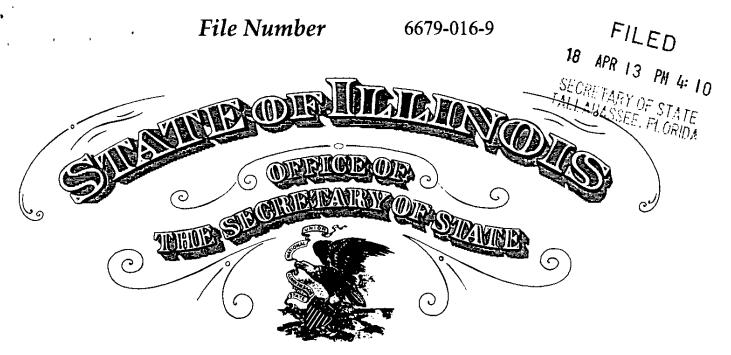
9. Registered agent's acceptance:

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.

(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. DIREC	DIRECTORS FILED				
Chairman: _	Mark Domnenko	APR .			
Address:	21 W301 Lake St.	SECRETARY OF STATE			
	Addison, IL (2010)	ORIDA			
Vice Chairma	an:				
Address:					
					
Director:					
Address:					
					
Director:					
Address:					
B. OFFIC	ERS				
President: _	Mark Domnenko	· · · · · · · · · · · · · · · · · · ·			
Address:	21 W301 Lake St.				
	Addison, 12 60101				
Vice Preside	nt: Matthew O'Connor				
Address:	21W301 Lake St.				
	Addison, IL 60101				
Secretary: _					
Address:					
Treasurer: _					
Address:		·			
NOTE: If	necessary, you may attach an addendum to the application listing additional of	ficers and/or directors.			
12.					
are true and	Signature of Director or Officer or director signing this document (and who is listed in number 11 above) affir that he or she is aware that false information submitted in a document to the I ee felony as provided for in s.817.155, F.S.				
13. <u>Mar</u>	13. Mork Domnen Ko President (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

MV21 INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON AUGUST 20, 2008, ADOPTED THE ASSUMED NAME FLORIDA RESTORATION21 ON MARCH 19, 2018, 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 26TH day of MARCH A.D. 2018.

Authentication #: 1808502062 verifiable until 03/26/2019
Authenticate at: http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 3, 2018

MARK DOMNENKO MV21 21W301 LAKE ST. ADDISON, IL 60101

SUBJECT: MV21 INC.

Ref. Number: W18000031869

We have received your document for MV21 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):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Karen A Saly Regulatory Specialist II

Letter Number: 818A00006694

RECEIVED DIGAPRIS AMII: 24

DEPARTMENT OF ST. DIVISION OF CORPORT TALLAHASSEE, FLOOR