# F1900000 235

(Re	questor's Name)	
(Add	dress)	
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SECRETARY OF STATE ALLAHASSEE, FLORID

APPROVED AND FILED

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### **COVER LETTER**

TO:	Registration So Division of Co				
SURI	Pita Puff ECT:	II, Inc.			
3000		Name of corpo	ration - mus	t include suffix	· · · · · · · · · · · · · · · · · · ·
Dear S	Sir or Madam:				
"Certi	ficate of Existent	tion by Foreign Corporation te," or "Certificate of Goo gn corporation to transact	d Standing"	and check are sul	
Please	return all corres	pondence concerning this	matter to the	following:	
Sam O	sborne				•
		Nai	ne of Person		
Atom	Law Group, LLC				
		Firm	n/Company		
770 N	LaSalie St., Ste 70	0			
			Address		
Chicag	jo, 1L 60654				
		City/S	tate and Zip	code	
aozbay	@atom.law				
		E-mail address: (to be	used for futt	ire annual report	notification)
For fu	rther information	concerning this matter, p.	ease call:		
Sam O	sborne	312 at (		3-8000	
	Name of Perso	on Are	a Code	Daytime Telep	ohone 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		
Enclos	sed is a check for	the following amount:			
<b>■</b> \$70	0.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status		75 Filing Fee & ified Copy	S87.50 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.

<del> </del>					
(If name unavail Illinois 2.	able in Florida, enter alternate corporate name	adopted for the purpose of transacting busine 46-5344396	ss in Florida)		
(State or country under the law of which it is incorporated) 04-09-2014		(FEI number, if applicable) 04-09-2014 to 09-22-2016, reinstated 03-01-2018 (Date of duration, if other than perpetual)			
6		n Florida, if prior to registration)   502, F.S., to determine penalty liability)	222 12	-	
7		pal office address)		-	
<del></del>	(Current maili	ng address, if different)	<u> </u>	-	
8. Name and stree Name:	et address of Florida registered agent: (P. Registered Agents Inc.	O. Box NOT acceptable)	SECRET!	2019 JAN -	Σ. Fi.
Office Address:	3030 N. Rocky Point Dr., STE 150A		SSEE SSEE	ထ	
		, Florida 33607	FST FLO	<u>무</u> 5	) / []
	(City)	(Zip code)	A TE	5: 44	
Having been nan designated in this further agree to c	ent's acceptance: ned as registered agent and to accept serv application, I hereby accept the appoint omply with the provisions of all statutes familiar with and accept the obligations of	ment as registered agent and agree to ac relative to the proper and complete perfo	et in this capa	icity.	

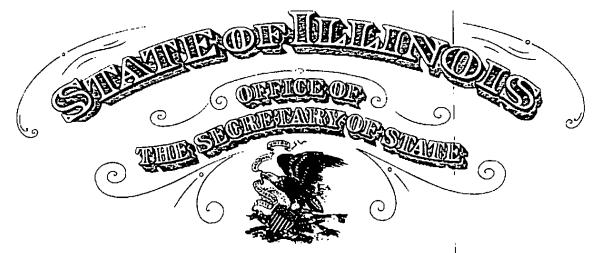
10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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

Chairman	Ghassan Abboud				
	11660 German Church Rd.				
Address:	Burr Ridge, IL 60527				
Vice Chai	rman:			_	
Address:		<u> </u>		<del></del>	
Director:				_	
				_	
Director:			· · ·	<del></del>	
B. OFF				_	
President:	Ghassan Abboud				
Add <del>ress</del> :	11660 German Church Rd.	يكيد	2	_	
	Burr Ridge, IL 60527	I.LA	J 61		
Vice Pres	ident:	ETAR	N +		-
Address:		<u> </u>	<del>- 0</del>	ES:	5
		FLQ S		{	7
Secretary:	Karam Karam	RED	£-		
Address:	24362 Leski Lane, Plainfield, IL 60585				
Treasurer	Karam Karam				
Address:	24362 Leski Lane, Plainfield, IL 60585			_	
NOTE:	If necessary, you may attach an addendum to the application listing additional officers and/or	directors		_	
12	Kenem Kalam				
are true a	Signature of Director or Officer ser or director signing this document (and who is listed in number 11 above) affirms that the fund that he or she is aware that false information submitted in a document to the Department of egree felony as provided for in s.8)7.155, F.S.			s	
13	(Typed or printed name and capacity of person signing application)			_	

#### File Number

6956-611-1



## 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

PITA PUFF II INC.. A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON APRIL 09, 2014, 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 6TH day of DECEMBER A.D. 2018.

Authentication #: 1834002116 verifiable until 12/06/2019
Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE