

F19 000000330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

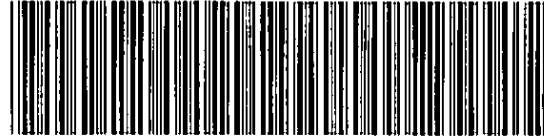
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January 10, 2019

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: KNA Management & Supplies, Inc.

To whom it may concern:

The Enclosed Application by Foreign Corporation and Fee(s) are submitted for filing. Also, please find enclosed a check for state filing fees in the amount of **\$78.75** made payable to the FL Dept of State. For information to this filing at the undersigned.

Thank you in advance and please return all correspondence in regards to this filing using the pre addresses stamped envelope included.

Sincerely,

**Amanda J. Beren, Sr. Document Analyst**

CorpNet, Incorporated

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CorpNet, Incorporated | 31416 Agoura Road, #118 | Westlake Village, California 91361

**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. KNA Management & Supplies, 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. 46-4085824  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11/06/2013 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. 19027 Jodi Drive, Unit B, Mokena, IL 60448  
(Principal office address)
- \_\_\_\_\_ (Current mailing address, if different)

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

Name: Registered Agents Inc.  
Office Address: 3030 N. Rocky Point Dr., Ste. 150A  
Tampa, Florida 33607  
(City) (Zip code)

**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.*

Bill Ham  
(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 Kimberly Heath

Address 707 Colony Lane, Frankfort, IL 60423

Director Robert Quinn

Address 707 Colony Lane, Frankfort, IL 60423

B. OFFICERS

President Kimberly Heath

Address 707 Colony Lane, Frankfort, IL 60423

Vice President Robert Quinn

Address 707 Colony Lane, Frankfort, IL 60423

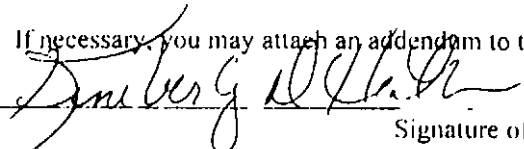
Secretary Robert Quinn

Address 707 Colony Lane, Frankfort, IL 60423

Treasurer Kimberly Heath

Address 707 Colony Lane, Frankfort, IL 60423

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

12.  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 5.817.155, F.S.

13. Kimberly Heath, President

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

File Number

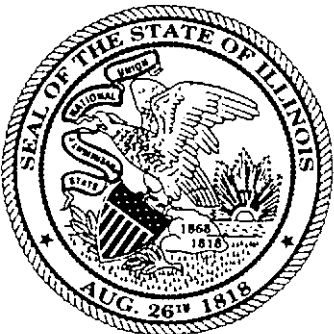
6928-886-3



**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*

KNA MANAGEMENT & SUPPLIES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON NOVEMBER 06, 2013, 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 10TH  
day of JANUARY A.D. 2019 .***

*Jesse White*

SECRETARY OF STATE

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Address \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

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\_\_\_\_\_

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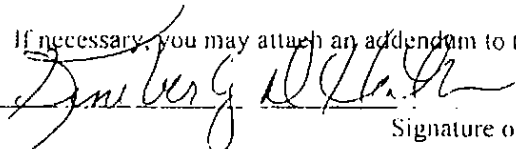
Secretary, Robert Quinn

Address 707 Colony Lane, Frankfort, IL 60423  
\_\_\_\_\_

Treasurer, Kimberly Heath

Address 707 Colony Lane, Frankfort, IL 60423  
\_\_\_\_\_

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Signature of Director or Officer

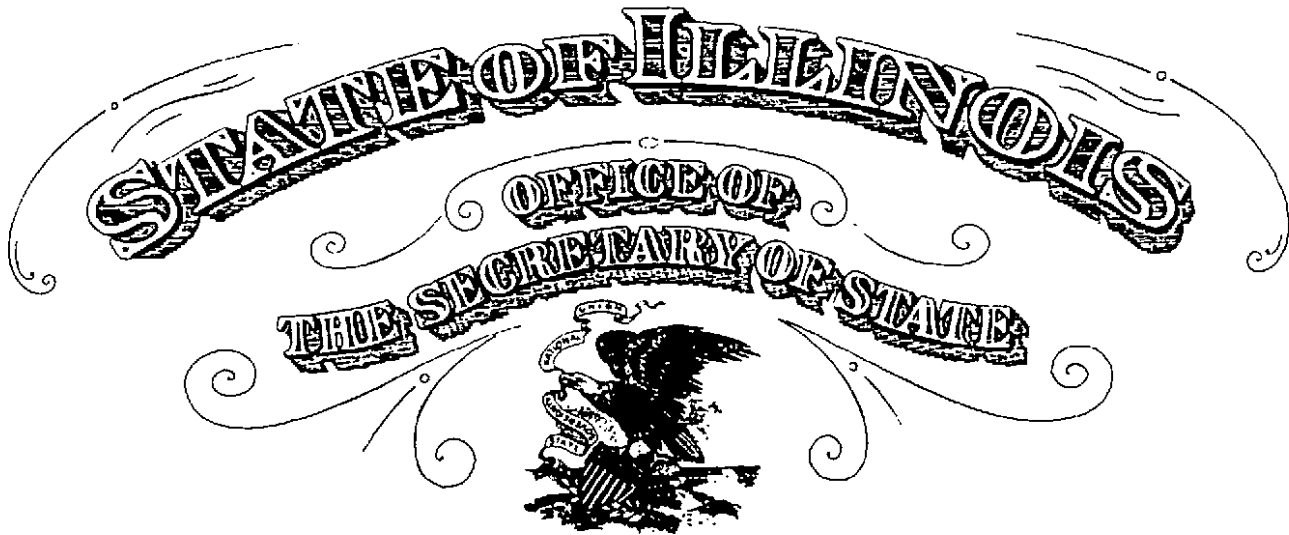
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*Jesse White*

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