F19000002153

(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:				





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COVER LETTER

TO: Registration Section Division of Corporations				
BIG Y ENTERPRISES, INC	· ·			
SUBJECT:Name	of corporation	- must include suffix		
Dear Sir or Madam:				
The enclosed "Application by Foreign C "Certificate of Existence," or "Certificat above referenced foreign corporation to	e of Good Stan	ding" and check are subm	Business in Florida." nitted to register the	
Please return all correspondence concert THOMAS F. SIELOFF, JR.	ning this matter	to the following:		
	Name of	Person		
	Firm/Com	pany		
240 PINE CONE LANE				
	Addre	ess		
LONGWOOD, FL 33779				
	City/State a	nd Zip code		
PERRAN@PGWETZEL.COM		C. C	atification)	
E-mail addre	ss: (to be used	for future annual report no	offication)	
For further information concerning this	matter, please	call:		
PERRAN WETZEL	773	430-9200	430-9200	
Name of Person	_ at (Area Cod	Daytime Teleph	one Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		Registration Se Division of Co P.O. Box 6327	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the following an	mount:	3		
□ \$70.00 Filing Fee □ \$78.75 Fil Certificate	_	\$78.75 Filing Fee & Certified Copy	■ \$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.

BIG Y ENTERP			
(Enter name of co	rporation; must include "INCORPORATED," rp," "Inc," "Co," or "Corp.")	"COMPANY." "CORPORATIO	٧."
BIG Y ENTERP			
(If name unavailab	ole in Florida, enter alternate corporate name a	dopted for the purpose of transacting	ng business in Florida)
Illinois, COOK	3		
(State or country	under the law of which it is incorporated)	(FEI number, if applicable)	
·	of incorporation) 5.	(Date of duration, if other	than perpetual)
(Date	or meorporationy	(
240 PINE CONE 7	(SEE SECTIONS 607.1501 & 607.15 LANE, LONGWOOD, FL 33779 (Princip	al office address)	
	(Current mailin	g address. if different)	
8. Name and <u>stree</u> Name: Office Address:	t address of Florida registered agent: (P.C. THOMAS F. SIELOFF, JR. 240 PINE CONE LANE LONGWOOD	33779 Florida	AIL APR 29 AN 3:5
	(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.

Men I (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 THOMAS F. SIELOFF, JR. Chairman: 240 PINE CONE LANE, LONGWOOD, FL 33779 Address: Vice Chairman: ______ THOMAS F. SIELOFF, JR. Director: 240 PINE CONE LANE, LONGWOOD, FL 33779 Address: _ **B. OFFICERS** THOMAS F. SIELOFF, JR. President: 240 PINE CONE LANE, LONGWOOD, FL 33779 Address: THOMAS F. SIELOFF, JR. Secretary: _ 240 PINE CONE LANE, LONGWOOD, FL 33779 Address: _ THOMAS F. SIELOFF, JR. Treasurer: 240 PINE CONE LANE, LONGWOOD, FL 33779 Address: _____ 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.

THOMAS F. SIELOFF, JR.

File Number

7191-266-3



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

BIG Y ENTERPRISES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JULY 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 23RD day of APRIL A.D. 2019 .

Authentication #: 1911302108 verifiable until 04/23/2020 Authenticate at: http://www.cyberdriveillinois.com Desse White

SECRETARY OF STATE