F19000004035

(Re	equestor's Name)			
(Ac	ddress)			
(Ac	ddress)	<u> </u>		
(Cit	ty/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL		
(Bu	usiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of Stat	us		
Special Instructions to	Filing Officer:			
		Y		





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SEP 0 4 2019 M. SOLOMON



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 21, 2019

JEFF CHUA AWC, INC. 2149 S. SORRENTO HILLS RD. ST. AUGUSTINE, FL 32092

SUBJECT: ADEPTICON

Ref. Number: W19000077512

We have received your document for ADEPTICON and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 319A00017274

Mel Solomon Regulatory Specialist II Supervisor

www.sunbiz.org

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COVER LETTER

то:	Registration Section Division of Corporations		
	AWC, Inc.		
SUBJ	ECT:		
	Name of	corporation -	must include suffix
Dear S	Sir or Madam:		
"Certi	nclosed "Application by Foreign Corp ficate of Existence," or "Certificate of referenced foreign corporation to trans	f Good Standi	uthorization to Transact Business in Florida," ng" and check are submitted to register the in Florida.
Please Jeff Cl	return all correspondence concerning	g this matter to	the following:
		Name of Pe	rson
AWC,	Inc.		
		Firm/Compa	iny
2149 \$	S. Sorrento Hills Rd.	-	
		Address	
St. Au	gustine, FL 32092		
		City/State and	Zin code
chua_i	cff@yahoo.com		zap codo
	E-mail address:	(to be used for	future annual report notification)
For fu	rther information concerning this ma	tter, please cal	1:
Jeff C		630 .t (788-4733
	Name of Person	Area Code	Daytime Telephone 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

☐ \$78.75 Filing Fee & ■ \$87.50 Filing Fee,

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

□ \$78.75 Filing Fee &

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. AWC. Inc. 1. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.") AdeptiCon Inc. (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 38-3747119 (FEI number, if applicable) (State or country under the law of which it is incorporated) 10/20/06 (Date of incorporation) 6. (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 2863 W. 95th St. Suite 143 - 112, Naperville, IL 60564 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Jeff Chua Name: 2149 S. Sorrento Hills Rd. Office Address: St. Augustine (Zip code) (City) 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:

11. IVali	ies and business addresses of officers and/of directors.			
A. DIR	ECTORS			
Chairman				
Address:				
Vice Cha	irman:		<u>. </u>	
Address:				
Director:				
Address:				
Director:				
Address:				
		- '	2018	
B. OFF			SEP	.,
President	Hank Edley :		ည်	•
	1405 W. Columbia Terrace	<i>}</i> -	æ. 3:	7 % 3 '
Audiess.	Peoria, IL 61606	SE SE	Ú.	
			<u> </u>	
Vice Pres	ident:			
Address:				
	Matt Weeks			
Secretary	·			
Address:				
Treasurer	Jeff Chua			
Address:	2149 S. Sorrento Hills Rd, St. Augustine, FL 32092			
		••		
	If necessary, you may attach an addendum to the application listing additional officers and/o	or directo	rs.	
12	Signature of Director or Officer			

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.

File Number

6520-256-5



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

AWC, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 20, 2006, 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 13TH day of AUGUST A.D. 2019 .

Authentication #: 1922501792 verifiable until 08/13/2020 Authenticate at: http://www.cyberdriveillinois.com Desse White

SECRETARY OF STATE