

F19000004152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

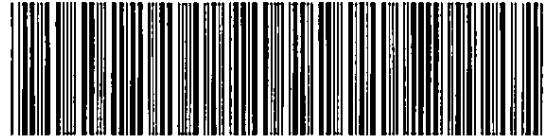
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SEP 10 2019



COPY

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 20, 2019

DRAKE MERTES  
701 LEE STREET, STE 790  
DES PLAINES, IL 60016

SUBJECT: UNIVERSAL ASSET MANAGEMENT, INC.  
Ref. Number: W19000077158

*check not received!*

We have received your document for UNIVERSAL ASSET MANAGEMENT, 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):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

The document number of the name conflict is L03000038136.

To make the necessary corrections and resubmit your filing, return to our website and access electronic filing, then online filing. Choose to update your request by using the confirmation number and the pin number listed above. For any questions concerning the website, please call 850-245-6939. **Please disregard this letter, if you have contacted our office and were advised how to correct your document online.**

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

Brooke N Kinsey  
Regulatory Specialist II  
Registration Section

Letter Number: 219A00017172

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Universal Asset Management, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Drake D. Mertes, Esq.

Name of Person

Dowd, Dowd & Mertes, Ltd.

Firm/Company

701 Lee Street, Suite 790

Address

Des Plaines, IL 60016

City/State and Zip code

danieltshoffet@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Drake D. Mertes

847

827-2181

at ( )

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

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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**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. Universal Asset Management, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Universal Asset Management of Illinois, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Illinois

3. 84-2556331

(State or country under the law of which it is incorporated)

(FEI number, if applicable)

4. June 10, 2019

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. 1111 North Plaza Drive, Suite 200

(Principal office address)

Schaumburg, IL 60173

(Current mailing address, if different)

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

Name: Ron Shoffet

Office Address: 2333 NE 28th Court

Lighthouse Point

(City)

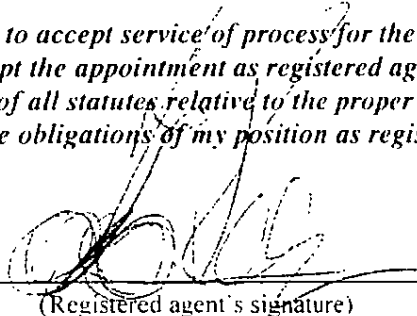
Florida

33064

(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.*



(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.

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

**A. DIRECTORS**

Chairman: N/A

Address: \_\_\_\_\_

Vice Chairman: N/A

Address: \_\_\_\_\_

Director: Daniel T. Shoffet

Address: 1111 North Plaza Drive, Suite 200  
Schaumburg, IL 60173

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Daniel T. Shoffet

Address: 1111 North Plaza Drive, Suite 200  
Schaumburg, IL 60173

Vice President: N/A

Address: \_\_\_\_\_

Secretary: Daniel T. Shoffet

Address: 1111 North Plaza Drive, Suite 200; Schaumburg, IL 60173

Treasurer: Daniel T. Shoffet

Address: 1111 North Plaza Drive, Suite 200; Schaumburg, IL 60173

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

12. 

Signature of Director or Officer

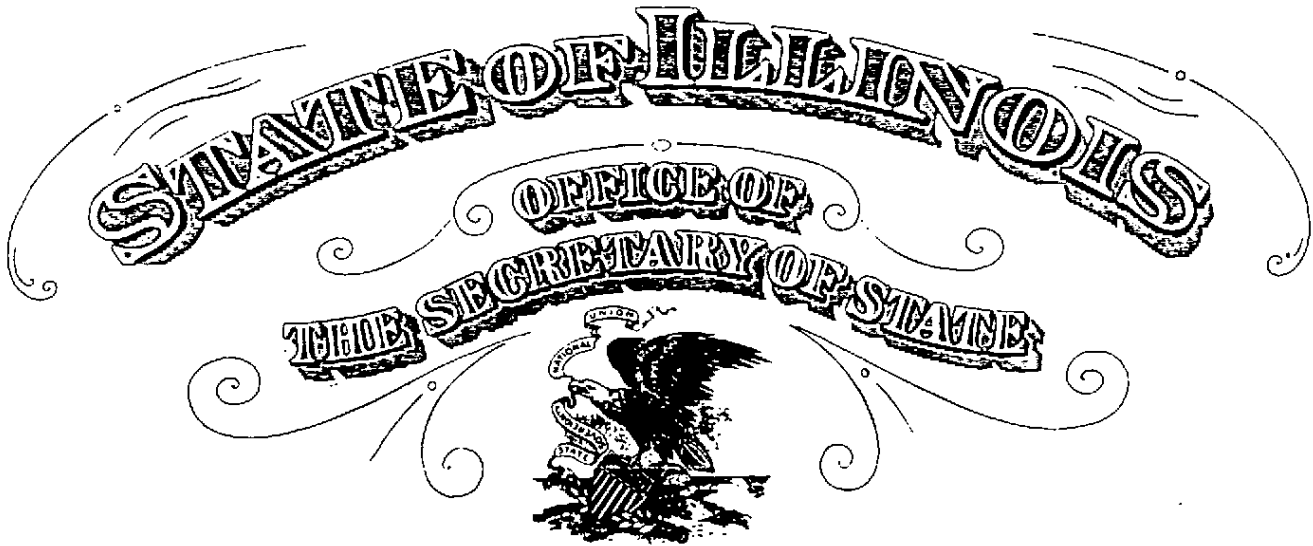
The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Daniel T. Shoffet, President

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

File Number

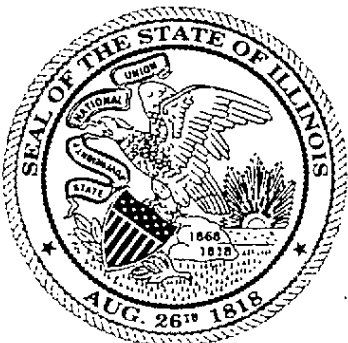
7235-337-4



**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*

UNIVERSAL ASSET MANAGEMENT, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JUNE 10, 2019, 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 30TH  
day of JULY A.D. 2019 .

*Jesse White*