# F1900001881

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
(City/State/Zip/Prione #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(2.3.3.3.2.2)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer				
Special Instructions to Filing Officer:				

Office Use Only



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TALLAHASSEE FLORIDA

2019 OCT 11 PM 4:194 OCT 11 PM 1:5

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 944541

AUTHORIZATION

COST LIMIT

ORDER DATE: October 4, 2019

ORDER TIME : 12:40 PM

ORDER NO. : 944541-025

CUSTOMER NO: 7863777

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## FOREIGN FILINGS

NAME: W.B. MCCLOUD & CO INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson -- EXT# 62980

EXAMINER:

78637-7

# **COVER LETTER**

TO: Registration Section Division of Corporations	
W. B. McCloud & Co., Inc.	
	on - must include suffix
Dear Sir or Madam:	2019 OK
The enclosed "Application by Foreign Corporation fo "Certificate of Existence," or "Certificate of Good Sta above referenced foreign corporation to transact busing the corporation of t	anding" and check are submitted to register the-
Please return all correspondence concerning this matter	er to the following:
Name of	
Firm/Con	mpany
Add	ress
City/State	and Zip code
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
Name of Person Area Coo	de 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:	

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

☐ \$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.

W. B. McCloud & Co., Inc.  (Enter name of corporation; must include "INCORPORATE "Inc.," "Co.," "Corp," "Inc," "Co.," or "Corp.")				"COMPANY," "CORPORATION,"		
	(If name unavails	able in Florida, enter alternate corporate name	ad	dopted for the purpose of transacting business in Florida)		
2.	Delaware	3.	3	36-2931474		
4.	09/19/1977	State or country under the law of which it is incorporated)		(FEI number, if applicable)		
	(Date of incorporation)		· –	(Date of duration, if other than perpetual)		
б.	October 1, 2019			190		
7.	1635 N. Lancaste	r Road, South Elgin, IL 60177	150	02, F.S., to determine penalty liability)		
		(Current maili	ing	g address, if different)		
8.	Name and stree	et address of Florida registered agent: (P.0	O.	. Box <u>NOT</u> acceptable)		
	Name:	Corporation Service Company		<u>—</u>		
O	ffice Address:	1201 Hays Street				
		Tallahassee		, Florida		
		(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.

Corporation Service Company By: Wallul During	Roxanne Turner Asst. Vice Presiden				
(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:	
Address:	
	7019 ALI
Director	है .स
Director:	$Q: \longrightarrow V$
Address:	
B. OFFICERS	0. "
Christopher McCloud V	RIDA RIDA
1635 N. Lancaster Road, South Floin, H. 60177	
Vi- Dit-	·
Vice President:	
Address:	
Stenhanie Dickson	
Secretary:	
Richard I Burke	
Treasurer: 1635 N. Lancaster Road, South Elgin, IL 60177	
Address:	
NOTE: If necessary, you may attach an addendum to the application	tion listing additional officers and/or directors.
12	
Signature of Director of Comment (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 submitte a third degree felony as provided for in s.817.155, F.S.	d in a document to the Department of State constitutes
3. Richard J. Burke, Treasurer	
(T)	

# Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "W. B. MCCLOUD & CO., INC." IS DULY

INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS

OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF OCTOBER, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "W. E. MCCLOUD & CO., INC." WAS INCORPORATED ON THE NINETEENTH DAY OF SEPTEMBER,

A.D. 1977.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

A COLUMN TO STATE OF THE PARTY OF THE PARTY

Authentication: 203773994

Date: 10-11-19