# F2000003936

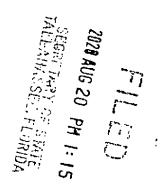
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	<del>.</del>
(Do	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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<b>%</b>	* *	ě g			
	COVE	R LETTER			
TO: Registration Section Division of Corporations					
SUBJECT: Angel Water, Inc.					
	Name of corpora	ition - must include suffi	x		
Dear Sir or Madam:					
The enclosed "Application by Forei "Certificate of Existence," or "Certi above referenced foreign corporation	on to transact bus	standing" and check are siness in Florida.	submitted to register the		
Please return all correspondence cor	ncerning this ma	itter to the following:	(028 (126 (AL)		
Anthony Colletti, CPA		C	AUG		
	Name	of Person	- इस्ति <b>क</b>		
Colletti & Associates, Inc.		01 1 613011	<u> </u>		
200 Bridle Path Lane	Firm/C	Company	변경 등 유럽 등		
200 Bildle Fatti Lane		<b></b> .	<b>₽</b> ₩ 5		
	Ad	Idress			
Fox River Grove, IL 60021					
	City/State	e and Zip code	<del>-</del>		
CollettiA@msn.com		•			
E-mail add	dress: (to be use	d for future annual repor	rt notification)		
For further information concerning the			,		
Anthony Colletti, CPA	847 at (	287-4657			
Name of Person	Area Co	ode Daytime Tele	ephone Number		
STREET/COURIER ADD	RESS:	MAHINO	ADDDECC		
Registration Section			MAILING ADDRESS: Registration Section		
The Court Corporations Division of Corpo		Corporations			
	The Centre of Tallahassee		P.O. Box 6327		
2415 N. Monroe Street, Suite Tallahassee, FL 32303	810	Tallahassee,	FL 32314		
Enclosed is a check for the following	amount:				
Please make check payable to: FLORIDA	DED A DESCRIPTION	·			

## 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.

(Enter name of "Inc.," "Co.," "C	corporation; must include "INCORPORATED." Corp." "Inc." "Co," or "Corp.")	"COMPANY." "CORPORATION	ON,"		
	lable in Florida, enter alternate corporate name ac			in Flor	rida)
Illinois	3. <u></u>	270106277  er the law of which it is incorporated)  (FEI number, if applicable)			
10/05/2004					•
(Date	e of incorporation) 5	(Date of duration, if other	r than perper	ual)	
			 	<b></b> :	
	(Date first transacted business in F (SEE SECTIONS 607.1501 & 607.150) est Hwy, Barrington, IL 60010	lorida, if prior to registration) 2, F.S., to determine penalty lab	ility)	1023 AUG 2	
	(Principal office	street address)		- PH	
		address, if different)	NATE OF THE PARTY	: 15	
Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)			
Name:	Henry Taylor				
fice Address:	249 SW Otter Run Place				
	Stuart	, Florida			
	(City)	(Zip code)			
iving been nam	ent's acceptance: ed as registered agent and to accept service application, I hereby accept the appointmet	of process for the above state at as registered agent and ag	ed corporati	ion at t	the plac

\_ <del>QC</del>\_\_\_\_

and I am familiar with and accept the obligations of my position as registered agent.

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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

### A. DIRECTORS Andrew J. Wilson Name: Chairman □ Chairman Name: 28214 W Northwest Hwy □Vice Chairman Address: □Vice Chairman Address: Barrington, IL 60010 □ Director Director President □ President ☐ Vice President □ Vice President ☐ Secretary □Treasurer ☐ Secretary ☐ Treasurer □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ □ Chairman Name: □ Chairman Name: \_\_\_\_\_ □Vice Chairman Address: ☐ Vice Chairman Address: \_\_\_\_ Director Director ☐ President ☐ President □Vice President ☐ Vice President ☐ Secretary □Treasurer ☐ Secretary □ Other \_\_\_\_\_ ☐Other \_\_\_\_ Other Other \_\_\_ Chairman Name: □ Chairman Name: \_\_\_\_\_ ☐ Vice Chairman Address: \_\_\_\_\_ □Vice Chairman Address: ☐ Director □ Director President □President □Vice President ☐ Vice President ☐ Secretary □Treasurer ☐ Secretary ☐ Treasurer □Other \_\_\_\_\_ □Other \_\_\_\_\_ Other \_\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when fitting your North Department of State Annual Report form. 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.

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

13. Andrew J. Wilson CEO



## 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

ANGEL WATER, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 05, 2004, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, 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. 2020 .

Authentication #: 2022602074 verifiable until 08/13/2021
Authenticate at. http://www.cyberdriveillinois.com

Desse White

SECRETARY OF STATE