Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000030819 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FOX ROTHSCHILD LLP

Account Number : I20130000024 Phone : (215)299-2162 Fax Number : (215)299-2150

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:__

FOREIGN PROFIT/NONPROFIT CORPORATION Lifted Liquids, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$70.00

Help

Electronic Filing Menu

Corporate Filing Menu



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.

If name unavail	ble in Florida, enter alternate corporate name adopted for the purpose of transacting business in $85-iU5, 2789$	Florida)
(State or countr	y under the law of which it is incorporated) 3. 85-1453789 (FEI number, if applicable)	
01/07/2020		
(Date	of incorporation) 5. (Date of duration, if other than perpetual	al)
·	· ·	
	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
43360	N US Hwy 41, Unit H, Zion, IL 600001 (Principal office street address)	
-	(Principal office street address)	
43360	N US HWY 41 Unit H, Zion, 12 60099 (Current mailing address, if different)	
	(Current mailing address, if different)	~
Name and stre	nt address of Florida registered agent: (P.O. Box NOT acceptable)	
Name:	Corporate Creations Network, Inc.	•
ffice Address:	801 US Highway 1	
	North Palm Beach, Florida 33408 (City) (Zip code)	r
	(City) (Zip code)	
Registered ag	ent's acceptance: ned as registered agent and to accept service of process for the above stated corporatio application, I hereby accept the appointment as registered agent and agree to act in omply with the provisions of all statutes relative to the proper and complete performa	this capac
esignated in this orther agree to d	Ashley Goldsmith, Special Secretary	

^{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	- SEE ATTACH	MENT A - L	IFTED LIQUIDS, INC.		
OChairman	Name:		Name:		
□Vice Chairman	Address:	_ Uvice Chairman	Address:		
□Director		_ Ci Director			
☐ President		_ O President			
OVice President		_ □Vice President			
DS caretary	☐ Treasurer	☐ Secretary	☐Treasurer		
Other	DOther				
DChnirman	Name:	Chairman	Name:		
□Vice Chairman	Address:	_ □Vice Chairman	Address:		
Director		Director			
☐ President	· · · · · · · · · · · · · · · · · · ·	President			
☐ Vice President		□Vice President			
□ Secretary	☐ Tressurer	☐ Secretary	OThessurer		
□ Otber	□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		
□Ot hет		□ 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 filing your Florida Department of State Annual Report form. 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					
13. William C. Jacobs (Typed or printed name and capacity of person signing application)					

Attachment A - Lifted Liquids, Inc.

Directors:

Gerard M. Jacobs, Chairman

Address: PO BOX 1187

New Smyrna Beach, FL 32170

Nicholas S. Warrender, Vice Chairman

Address:

43360 N US HWY 41 UNIT H

Zion, IL 60099

Vincent J. Mesolella, Lead Outside Director

Address:

43360 N US HWY 41 UNIT H

Zion, IL 60099

Robert T. Warrender II, Director

Address:

43360 N US HWY 41 UNIT H

Zion, IL 60099

Richard E. Morrissy:

Address:

43360 N US HWY 41 UNIT H

Zion, IL 60099

James S. Jacobs:

Address:

43360 N US HWY 41 UNIT H

Zion, IL 60099

Joshua A. Bloom:

Address:

43360 N US HWY 41 UNIT H

Zion, IL 60099

Kevin J. Rocio:

Address:

43360 N US HWY 41 UNIT H

Zion, IL 60099

Officers:

Nicholas S. Warrender, CEO and COO

Address:

43360 N US HWY 41 UNIT H

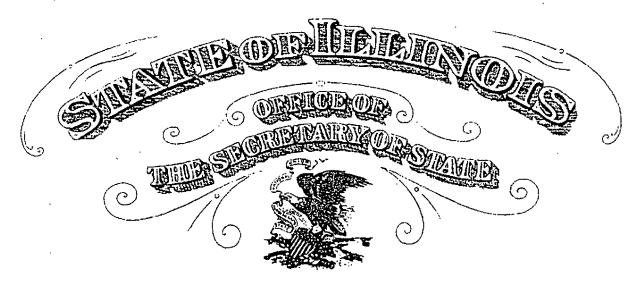
Zion, IL 60099



William C. Jacobs, President, CFO and Treasurer Address: PO Box 383 New Smyrna Beach, FL 32170

Gerard M. Jacobs, Secretary Address: PO BOX 1187 New Smyrna Beach, FL 32170 File Number

7261-652-9



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

LIFTED LIQUIDS, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 07, 2020, 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 19TH day of JANUARY A.D. 2021.

Authentication #, 2101905378 verifiable until 01/19/2022
Authenticate at: http://www.cyberdr.veillinois.com

Desse White

SECRETARY OF STATE