

F210000001394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

(Business Entity Name)

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The Law Office Of
Vito P. LoVerde

6318 Kingsbridge Drive, Cary, Illinois 60013
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Vito P. LoVerde
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Susan M. Narimatsu
Direct: 630.762.1197
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Sent via U.S. Mail

February 15, 2021

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: *Butler Leasing, Inc., an Illinois Corporation*
Application for Authority

Dear Sir or Madam:

Enclosed for filing with your office, in duplicate, is an Application for Authority for the above-named Illinois Corporation as well as the Cover Letter, and a current Certificate of Good Standing issued from the Illinois Secretary of State.

Our firm's check in the amount of Seventy Dollars and No Cents (\$70.00) is attached hereto.

Once the documents have been accepted and filed, please return the file-stamped duplicate copy to me in the prepaid self-addressed envelope enclosed.

If any additional information or documentation is required, I would appreciate if you would contact me directly.

Very truly yours,

Vito P. LoVerde

Enclosures

VPL/amy

2021 FEB 25 PM 2:11
FEB 25 2021
FEB 25 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Butler Leasing, 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:

Vito P. LoVerde

Name of Person

The Law Office of Vito P. LoVerde

Firm/Company

6318 Kingsbridge Drive

Address

Cary, Illinois 60013

City/State and Zip code

VPL@LoVerdeLaw.com

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

For further information concerning this matter, please call:

Vito P. LoVerde

at (847) 639-9600

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- ☒ \$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

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

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

2. Illinois 3. 26-4124675
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. January 27, 2009 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. Date of Registration
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 738 Park Avenue, Libertyville, Illinois 60048
(Principal office street address)

6318 Kingsbridge Drive, Cary, Illinois 60013
(Current mailing address, if different)

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

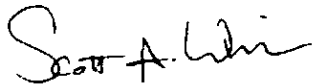
Name: CT Corporation

Office Address: 1200 S. Pine Island Road, Suite 250

Plantation, Florida 33324
(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.



Scott White
Assistant Secretary

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

A. DIRECTORS

☐ Chairman Name: James M. Butler
☐ Vice Chairman Address: 738 E. Park Avenue
☒ Director Libertyville, Illinois 60048
☒ President _____
☐ Vice President _____
☒ Secretary ☒ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Vito P. LoVerde
☐ Vice Chairman Address: 6318 Kingsbridge Drive
☐ Director Cary, Illinois 60013
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other Asst. Secretary ☐ Other _____

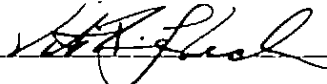
☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ 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 s.817.155, F.S.

13. Vito P. LoVerde, Assistant Secretary
(Typed or printed name and capacity of person signing application)

File Number

6686-955-5

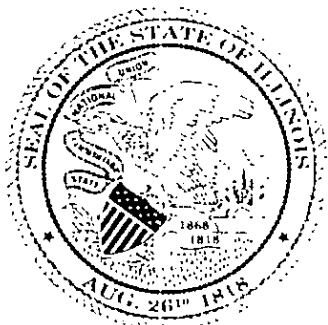


To all to whom these Presents Shall Come, Greeting:

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

BUTLER LEASING, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 27, 2009, 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 15TH
day of FEBRUARY A.D. 2021 .



Authentication #: 2104601054 verifiable until 02/15/2022
Authenticate at: <http://www.cyberdriveillinois.com>

Jesse White

SECRETARY OF STATE