

F21000002799

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

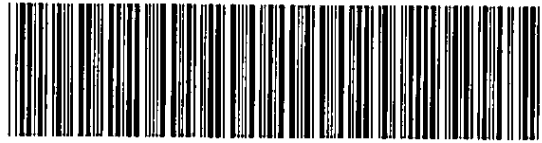
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5/22/21

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: American Business Immigration Coalition, Inc.

Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Shelley Friedland

Name of Person

Harmon, Curran, Spielberg, & Eisenberg, LLP

Firm/Company

1725 DeSales Street NW

Suite 500

Address

Washington, D.C. 20036

City/State and Zip Code

paralegal@harmoncurran.com

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

For further information concerning this matter, please call:

Susan Hamsher

at (202) 328-3500

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

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

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 NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:*

1. American Business Immigration Coalition, Inc.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

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

2. Illinois 3. 84-4206259
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 12/12/2019 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

6. 11/30/20
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 1805 S Ashland Ave, Chicago, IL, 60608
(Principal office street address)

(Current mailing address, if different)

8. The corporation is organized and will be operated exclusively for charitable and educational purposes.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

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

Name: Incorp Services, Inc.

Office Address: 17888 67th Court North
Loxahatchee, Florida 33470
(City) (Zip Code)

10. 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.



Amber Ragland for InCorp Services, Inc.

(Registered agent's signature)

11. 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.

12. 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: Rebecca Shi
☐ Vice Chairman Address: 1805 S Ashland Ave
☐ Director Chicago, IL, 60608
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other: Executive Director ☐ Other: _____

☐ Chairman Name: John Rowe
☐ Vice Chairman Address: 1805 S Ashland Ave
☐ Director Chicago, IL, 60608
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Sam Scott
☐ Vice Chairman Address: 1805 S Ashland Ave
☐ Director Chicago, IL, 60608
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Joshua Hoyt
☐ Vice Chairman Address: 1805 S Ashland Ave
☐ Director Chicago, IL, 60608
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Mike Fernandez
☐ Vice Chairman Address: 1805 S Ashland Ave
☐ Director Chicago, IL, 60608
☐ President _____
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: William Kunkler III.
☐ Vice Chairman Address: 1805 S Ashland Ave
☒ Director Chicago, IL, 60608
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

NOTE: 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.

13. Rebecca Shi
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Rebecca Shi, Executive Director
(Typed or printed name and capacity of person signing application)

Directors, Continued

First Name: Paul **Last Name:** DiMare **Title:** Director
Mailing Address: 1805 S Ashland Ave **City:** Chicago
State: Illinois **Zip Code:** 60608

First Name: Mike **Last Name:** Kaplan **Title:** Director
Mailing Address: 1805 S Ashland Ave **City:** Chicago
State: Illinois **Zip Code:** 60608

First Name: Penny **Last Name:** Pritzker **Title:** Director
Mailing Address: 1805 S Ashland Ave **City:** Chicago
State: Illinois **Zip Code:** 60608

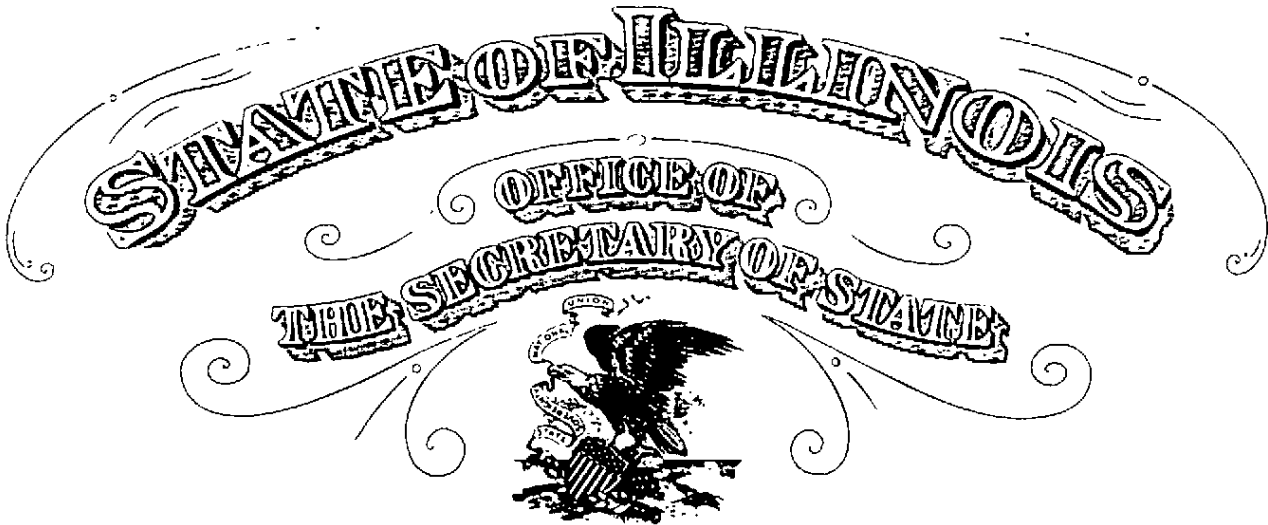
First Name: Raul **Last Name:** Raymundo **Title:** Director
Mailing Address: 1805 S Ashland Ave **City:** Chicago
State: Illinois **Zip Code:** 60608

First Name: Carole **Last Name:** Segal **Title:** Director
Mailing Address: 1805 S Ashland Ave **City:** Chicago
State: Illinois **Zip Code:** 60608

First Name: Woody **Last Name:** Hunt **Title:** Director
Mailing Address: 1805 S Ashland Ave **City:** Chicago
State: Illinois **Zip Code:** 60608

File Number

7259-282-4



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

AMERICAN BUSINESS IMMIGRATION COALITION, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON DECEMBER 12, 2019, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT 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 27TH
day of JANUARY A.D. 2021 .

Jesse White

SECRETARY OF STATE