# F2400003696

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





500368335855

U6/24/21--U1U17--UU3 \*\*78.75







March 14, 2021

JENNIFER SMITH 6547 N. AVONDALE AVE CHICAGO, IL 60631

SUBJECT: ZEMAN HOMES RV INC

Ref. Number: W21000034166

We have received your document for ZEMAN HOMES RV INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as or not distinguishable from the name of a voluntarily dissolved business entity. This name is not available for the assumption or use by another entity for 120 days after the effective date of the dissolution. The dissolved business entity may provide the Department of State with an affidavit or letter, releasing the name for use to you and affirming they have no intention of revoking the dissolution or you may adopt an alternate name for use in Florida. If you choose to adopt an alternate name, please enter that name in the space provided in number one of the application.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yvette Scott Document Specialist II

Letter Number: 721A00005366

### **COVER LETTER**

_	tration Section ion of Corporat	ions				
SUBJECT:	Zeman Homes l					
SUBJECT:		Name of corporation - must include suffix				
Dear Sir or M	adam:					
"Certificate o	f Existence," or	y Foreign Corporation for Certificate of Good Stoporation to transact busing the contract of t	anding":	and check are subn	Business in Florida," hitted to register the	
Please return	all corresponde	nce concerning this mat	ter to the	following:		
Jennifer Smith				_		
_		Name	of Person	1		
Zeman Homes	RV Inc					
	_	Firm/C	ompany			
6547 N. Avono	dale Ave.				-	
		Ad	dress		-	
Chicago, IL 60	)631					
		City/State	and Zip	code		
licenses@zem	anhomes.com					
	E-	-mail address: (to be use	d for futi	ire annual report no	otification)	
For further in	formation conc	erning this matter, pleas	e call:			
Jennifer Smith	ı	at ( <sup>773</sup>	49 <sup>1</sup>	9-7255 Daytime Teleph		
Nam	e of Person	Area C	ode	Daytime Teleph	one 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 Please make cl ☐ \$70.00 Fil	heek payable to:	ollowing amount: FLORIDA DEPARTME \$78.75 Filing Fee & Certificate of Status	□ \$78.	TATE 75 Filing Fee & ified Copy	S87.50 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.

Zeman Homes I	RV Inc		
	orporation; must include "INCORPORATED," "forp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORAT	",noi
(If name unavail	able in Florida, enter alternate corporate name add	opted for the purpose of transa	cting business in Florida)
2. Illinois	3 83	-2294827	
	ry under the law of which it is incorporated)	(FEI number. i	f applicable)
4. 7/31/18	5.		
(Date	e of incorporation)	(Date of duration, if ot	her than perpetual)
6			
	(Date first transacted business in Fi (SEE SECTIONS 607.1501 & 607.1502		shiling
6547 N. Avondal	e Ave., Chicago, IL 60631	, r.s., to determine penany na	ionity)
7	(Principal office	street address)	
<del></del>	(Current mailing a	ddress, if different)	···: 21
8. Name and streen Name:	et address of Florida registered agent: (P.O. E	Box <u>NOT</u> acceptable)	JUN 24
Office Address:	1200 South Pine Island Rd.	_	D # 4: 09
	Plantation	, Florida 33324	NG 18
	(City)	(Zin 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.

(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: Edward C Zeman	□Chairman	Jeffrey Fannon Name:	
□Vice Chairman	Address: 6547 N. Avondale Ave.	□Vice Chairman	Address:	
□Director	Chicago, IL 60631	□Director	Chicago, IL 60631	
President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	Secretary	□Treasurer	
□Other	Other	Other CEO	Other	
□ Chairman	Name: Mark Connolly	□Chairman	Leslie Taylor-Rharbi	
□Vice Chairman	Address: 6547 N. Avondale Ave.	□Vice Chairman	Address: 3802 Ehrlich Rd., Suite 102	
□Director	Chicago, IL 60631	Director	Tampa, FL 33624	
□President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	□ Secretary	☐ Treasurer	
Other CFO	Other	Other Regional	VP Other	
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President	·	
□Vice President		□Vice President	<u>-</u>	
□Secretary	□Treasurer	☐ Secretary	□Treasurer	
Other	Other	□Other	Other	
individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Depa	rtment of State Annual Re	eport form.	
12. Phark (	Signature of Direc	tor or Officer		
The officer or direct she is aware that fars.817.155, F.S.	ctor signing this document (and who is listed in nu dse information submitted in a document to the De	mber 11 above) affirms the partment of State constitu	at the facts stated herein are true and that he cates a third degree felony as provided for in	

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

Mark Connolly, CFO

#### File Number

5433-178-9



## 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

ZEMAN HOMES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JULY 31, 1986, 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 22ND

day of

JUNE

**A.D.** 2021

Authentication #: 2117301322 verifiable until 06/22/2022 Authenticate at: http://www.cyberdriveillinois.com Desse White

SECRETARY OF STATE