

F22000003657

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

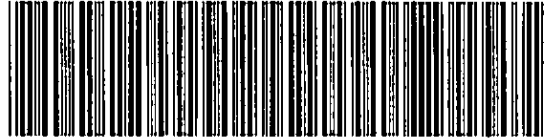
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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S. FRANKLIN

JUN 13 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kingsbridge Shared Services, 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. Kingsbridge Shared Services, 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. Delaware 3. 85-1905074
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. June 25, 2020 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. 2050 S. Finley Road, Suite 80, Lombard, Illinois 60148
(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)

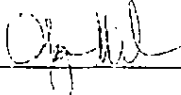
Name: C T Corporation System

Office Address: 1200 South Pine Island Road

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.

 Olga Hinkel, Vice President
(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]:

2022 MAY 25 PM 7:06

A. DIRECTORS

☒ Chairman Name: Robert E. Carzoli
☐ Vice Chairman Address: _____
☒ Director 2050 S. Finley Road
☐ President Lombard, Illinois 60148
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other CEO ☐ Other _____

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

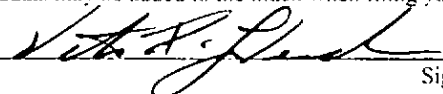
☐ Chairman Name: Jessica Kowatch
☐ Vice Chairman Address: _____
☐ Director 2050 S. Finley Road
☐ President Lombard, Illinois 60148
☒ Vice President EVP Operations
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Scott West
☐ Vice Chairman Address: _____
☐ Director 2050 S. Finley Road
☒ President Lombard, Illinois 60148
☐ Vice President _____
☐ Secretary ☒ Treasurer
☒ Other COO ☒ Other CFO

☐ Chairman Name: Amy Scheller
☐ Vice Chairman Address: _____
☐ Director 2050 S. Finley Road
☐ President Lombard, Illinois 60148
☒ Vice President EVP Strategy & Development / Sales
☐ Secretary ☐ Treasurer
☐ Other _____ ☐ Other _____

☐ Chairman Name: Michael J. Campolo
☐ Vice Chairman Address: _____
☐ Director 6318 Kingsbridge Drive
☐ President Cary, Illinois 60013
☐ Vice President _____
☐ Secretary ☐ Treasurer
☒ Other Asst. Secretary ☒ Other General Counsel

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

Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "KINGSBRIDGE SHARED SERVICES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF MAY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "KINGSBRIDGE SHARED SERVICES, INC." WAS INCORPORATED ON THE TWENTY-FIFTH DAY OF JUNE, A.D. 2020.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

2022 MAY 25 PM 7:06

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SR# 2022193C602

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203405574

Date: 05-11-22