F23000002533

(Requestor's Name)	
(Requestors Marile)	
(Address)	
(Audiess)	
(Address)	
(Modless)	
(City/State/Zip/Phone #)	
(City/State/Zip/Pilone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
, , ,	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
(\$2))
·	
· 3, 15	
3	
30 , 000	

Office Use Only



500404964945

2023 MAR 28 AM 9: 34

S. FRANKLIN
MAY 1 2023

COVER LETTER

	ration Section of Corporations		
SUBJECT:	GR	APHICS ON	E, INC.
	Name of	corporation	- must include suffix
Dear Sir or Ma	dam:		
"Certificate of		Good Stanc	Authorization to Transact Business in Florida," ling" and check are submitted to register the s in Florida.
Please return al	l correspondence concerning	this matter	o the following:
	į	Michael J. Sm	ith Esq.
		Name of P	erson on, Pl. any e West s a 34205
_	Na	njmy Thomps	on, PL
-		Firm/Comp	any 2.
	14	01 8th Avenu	e West
		Addres	s mo
	Bra	denton, Florid	a 34205
		City/State and	·
		ith@najmytho	
	E-mail address: (1	to be used to	r future annual report notification)
For further info	rmation concerning this matt	er, please ca	II:
Michael J. Smith	at	(⁹⁴¹	748-2216
Name	of Person	Area Code	Daytime Telephone Number
Registra Division The Cen 2415 N	cT/COURIER ADDRESS: ation Section in of Corporations intre of Tallahassee Monroe Street, Suite 810 issee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a ch	eck for the following amount k payable to: FLORIDA DEPA	ARTMENT C	of STATE \$78.75 Filing Fee &

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.

GRAPHICS ON	IE, INC.					
	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	ED,"	"COMPANY," "CORPORATION,"		<u> </u>	
(If name unavaila	able in Florida, enter alternate corporate na	ne a	idopted for the purpose of transacting bus	iness in F	lorida)	
LLINOIS		3.	3 47-0875856			
	r country under the law of which it is incorporated) (FEI number, if applic			rable)		
4. JULY 3, 2002		5.				
	of incorporation)		(Date of duration, if other than p	(Date of duration, if other than perpetual)		
. N/A						
1450 LAKEFRO		7.15	Florida, if prior to registration) 02. F.S., to determine penalty liability) 40		2023 HAR	
(Principal office street address)				28		
	(Current ma	ilin	g address, if different)	الله الله الله الله الله الله الله الله	M 9: 34	
3. Name and stree	et address of Florida registered agent: (P.O	. Box <u>NOT</u> acceptable)	-11:5	끝	
Name:	NAJMY THOMPSON, P.L.					
Office Address:	1401 STH AVENUE WEST					
	BRADENTON	, Florida 34205				
	(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.

(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.

A. DIRECTORS	VERN FIELD		DONNA FIELD		
□Chairman	Name: 1450 LAKEFRONT DRIVE	□Chairman	Name: 1450 LAKEFRONT DRIVE		
□Vice Chairman	Address:	□Vice Chairman	Address:		
□Director	UNIT 4310	□Director	UNIT 4310		
□President	SARASOTA, FL 34240	President	SARASOTA, FL 34240		
□Vice President		□Vice President			
■ Secretary	□Treasurer	□Secretary	□Treasurer		
□ Other	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 HAR		
□Other	Other	□Other	Other N		
□Chairman □Vice Chairman	Name:				
□Director		□Director			
□President		□President			
□Vice President		□Vice President			
□Secretary	□Treasurer	□Secretary	□Treasurer		
Other	Other	Other	Other		
	Use an attachment to report more than six (6). The added to the index when filing your Florida Depa	rtment of State Annual Re			

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. DONNA FIELD, AS PRESIDENT

File Number

6233-213-1



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, 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

GRAPHICS ONE, INC., A DOMESTIC CORPORATION. INCORPORATED UNDER THE LAVOF THIS STATE ON JULY 03, 2002, 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 MARCH A.D. 2023 .

Authentication #: 2307402950 verifiable until 03/15/2024

Authenticate at: https://www.ilsos.gov

Alexi Gianarch



April 8, 2023

MICHAEL J SMITH 1401 8TH AVENUE WEST BRADENTON, FL 34205 US

SUBJECT: GRAPHICS ONE, INC. Ref. Number: W23000048485

We have received your document for GRAPHICS ONE, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a foreign liability company, but your entity is a forein corporation. Please complete and return the enclosed blank form(s).

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.

Sharon D Franklin Regulatory Specialist II

RECEIVED APR 2.8 2020

Letter Number: 323A00007988