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(Requestor's Name)					
(Address)					
, ,					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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COVER LETTER

	tration Section ion of Corporations					
CUD IFCT.	STEPHENS RICKARD, LTD. (S	TEPHENS R	ICKARD, INC.)			
SUBJECT: Name of corporation - must include suffix						
Dear Sir or M	adam:					
"Certificate o	"Application by Foreign Corpo f Existence," or "Certificate of C ced foreign corporation to trans	Jood Standii	thorization to Transact Business in Florida," ng" and check are submitted to register the in Florida.			
Please return	all correspondence concerning	this matter to	the following:			
Frank J. Porte	era	_				
		Name of Pe	rson			
Lavelle Law, l	Ltđ.					
		Firm/Compa	any			
1933 N Meacl	nam Road, Suite 600					
		Addres	3			
Schaumburg.	IL 60173					
	C	Sity/State and	Zip code			
fportera@lave	ellelaw.com					
	E-mail address: (t	o be used fo	future annual report notification)			
For further in	nformation concerning this matt	er, please ca	H:			
Frank J. Porto	era	847	705-7555			
Nan	ne of Person	Area Code) 705-7555 Daytime Telephone Number			
Regi Divi The 241:	REET/COURIER ADDRESS: istration Section sion of Corporations Centre of Tallahassee 5 N. Monroe Street, Suite 810 ahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				
Enclosed is Please make o	a check for the following amount theck payable to: FLORIDA DEP illing Fee	ARTMENT Fee & \Box	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.

Stephens Rickar				
(Enter name of co	orporation; must include "INCORPORATED." "orp." "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION,"		
	Rickard, Inc.			
(If name unavaila	ible in Florida, enter alternate corporate name ado	pted for the purpose of transacting	business in Florida	
Delaware	3.			
(State or country under the law of which it is incorporated)		(FEI number, if applicable)		
02/04/2022	5			
(Date of incorporation)		(Date of duration, if other tha	(Date of duration, if other than perpetual)	
N/A				
	(Date first transacted business in FI (SEE SECTIONS 607,1501 & 607,1502 ad, Suite 180, Northbrook, IL 60062	orida, if prior to registration) , F.S., to determine penalty liability)	
·	(Principal office	street address)		
	(Current mailing a	ddress, if different)	63	
. Name and stree	et address of Florida registered agent: (P.O. I	Box NOT acceptable)	_	
Name:	Northwest Registered Agent LLC			
Office Address:	7901 4th St N STE 300	_	⊙	
	St. Petersburg	, Florida 33702	9	
	(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			Durana Dialonal			
□Chairman	Name:	□ Chairman	Name: Rupert Rickard			
□Vice Chairman	Address:	□Vice Chairman	Address: 3400 Dunder Road, Suite 180			
■ Director	Northbrook, IL 60062	Director	Northbrook, IL 60062			
■ President		□President				
□Vice President		□Vice President				
Secretary	■ Treasurer	■ Secretary	□Treasurer			
□Other	Other	□Other	□Other			
□Chairman	Name: Audry Lyn Buchanan Torrence	□ Chairman	Name:			
	3400 Dundee Road, Suite 180	□Vice Chairman	Address:			
□Vice Chairman	Northbrook, IL 60062	Director				
Director		□President				
□President						
■Vice President		□Vice President				
☐ Secretary	□Treasurer	□ Secretary	□Treasurer			
Other	Other	Other	Other			
□ Chaiπnan	Name:	□ Chairman	Name:			
	Address:	□Vice Chairman	Address:			
		□Director				
☐ Director		□President				
☐ President		□Vice President				
□Vice President		Secretary	□Treasurer			
Secretary	□Treasurer	•				
Other	Other	Other				
Important Notice individuals may b	: Use an attachment to report more than six (6). The pe added to the judge when filing your Florida Depar	rtment of State Annual F	Report form.			
12. <u>/</u>	L. D. Stophen Signature of Direct	or 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. Mark Stephens, President						

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "STEPHENS RICKARD, LTD" 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 SIXTH DAY OF SEPTEMBER, A.D. 2023.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STEPHENS

RICKARD, LTD" WAS INCORPORATED ON THE FOURTH DAY OF FEBRUARY, A.D.

2022.

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

a at corp delawate gov/auti

Authentication: 204107642

Date: 09-06-23

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