F23000066229

(Requestor's Name)
(Address)
(
(Address)
(City/State/Zip/Phone #)
(0.1) 0.10 0.10 0.1
PICK-UP WAIT MAIL
(Business Entity Name)
,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special Instructions to Filing Officer:

Office Use Only



200418009112

2023 NOV -2 PM 3: 17

RECEIVE

NOV 0 1 2023

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

11/02/2023

NAME:

CHICAGO INTERMODAL TRANSPORTATION, INC

TYPE OF FILING: APPLICATION

COST:

70.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO: Regis Divis	stration Section ion of Corporations			
SUBJECT:	Chicago Intermodal Transpo	rtation, Inc.		
	Name	of corporation	ı - must include suffix	
Dear Sir or M	adam:			
out in the case of	"Application by Foreign Co Existence," or "Certificate eed foreign corporation to tr	OI Good Star	iding" and check are cu-	act Business in Florida," bmitted to register the
Please return a	all correspondence concerni	ng this matter	to the following:	
Katrina Lukenb				
		Name of	Person	
Lewis Brisbois	Bisgaard & Smith LLP			
		Firm/Com	pany	
110 SE 6th St.,	#2600			
		Addre	ess	
Fon Lauderdale	FL 33301	_		
katrina.lukenbil	l@lewisbrisbois.com	City/State ar	nd Zip code	
		(to be used for	or future annual report i	otification)
For further info	ormation concerning this ma			
Katrina Lukenbi	11	954 1t (678-4088	
Name	of Person	Area Code	Daytime Telep	hone Number
Registr Divisio The Ce 2415 N	ET/COURIER ADDRESS ation Section n of Corporations ntre of Tallahassee . Monroe Street, Suite 810 ssee, FL 32303	:	MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
Enclosed is a chece the second of the second	neck for the following amounts by payable to: FLORIDA DEI g Fee S78.75 Filing Certificate of	PARTMENT (Fee &	OF STATE \$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.

	able in Florida, enter alternate corporate name a	adopted for the purpose of transact	ing business in Florida)
2. Illinois	3. Ty under the law of which it is incorporated)		
9/19/1989			
4. (Date of incorporation) 5. (Date of duration, if other than perpetual			
5			
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.15		ility)
7. 12161 S. Central	. Suite 201, Alsip, IL 60803		
	(Principal offi	ce <u>street</u> address)	"
····		10.100	28
	(Current mailin	g address, if different)	
R Name and stree	et address of Florida registered agent: (P.C). Box: NOT acceptable)	
	Paracorp Incorporated		NO EU
Name: Office Address:	155 Office Plaza Drive, 1st Floor		FILED PILED 23 NOV - 2 PM 3: 1
Mice Address.	Tallahassee	, Florida 32301	
		(Zip code)	
	(City)	(zip code)	
Having been nan designated in this further agree to c	(City) ent's acceptance: ned as registered agent and to accept servi s application, I hereby accept the appointn comply with the provisions of all statutes r r with and accept the obligations of my po	ce of process for the above stat ment as registered agent and ag elative to the proper and comp	gree to act in this capacity.

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 Name: Ed Rom Chairman ☐ Chairman Name: 12161 S. Central □ Vice Chairman Address: Address: □ Vice Chairman Suite 201 □ Director □Director Alsip, IL 60803 ■ President □ President ☐ Vice President ☐ Vice President **■**Secretary □Treasurer □ Secretary Treasurer □Other ______ □ Other _____ □Other ____ □Other _____ Name: Alan Vodovoz □ Chairman □Chairman Name: ______ 12161 S. Central ☐ Vice Chairman Address: □ Vice Chairman Address: Suite 201 □Director □ Director Alsip, IL 60803 ☐ President □ President □ 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 □Other Other _____ Other _____ Other

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.

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.

Ed Rom, President and Secretary

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 11/01/2023

ENTITY NAME: Chicago Intermodal Transportation, Inc.

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee. FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated

File Number

5567-002-1



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

CHICAGO INTERMODAL TRANSPORTATION, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON SEPTEMBER 19, 1989, 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 1ST day of NOVEMBER A.D. 2023.

Authentication #: 2330503852 verifiable until 11/01/2024

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

Alexi Sianarul