# 

| Division of Corporations   |  |  |  |  |
|--|--|--|--|--|
| SUBJECT: Webco 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", 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:  |  |  |  |  |
| Richard Webster (Name of Person)   |  |  |  |  |
| Webco Services Inc. 500001922053 (Firm/Company) 500001922053 -05/15/96-01041-010 ******70.00 *******70.00  |  |  |  |  |
| 3/W339 Schoger Rd. Bldg. B   |  |  |  |  |
| Naperville IL 60564  Resperville IL 60564  Gity/State/Zip)   |  |  |  |  |
| Should you need to call someone concerning this matter, please call:  Richard Webster  11 208 1978 - 43 54   |  |  |  |  |

#### **COURIER ADDRESS:**

(Name of Person)

TO:

Qualification/Fax Lien Section

Qualification/Tax Lien Sec. Division of Corporations 409 E. Gaines St Tallahassee, FL 32399

#### **MAILING ADDRESS:**

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

(Area Code & Daytime Telephone Number)

### PPLICATION 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.  | Webco Services .Tho.  (Name of corporation: must include the word "INCORPORATIDD", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of natural person or partnership if not so contained in the name at present.)   | •               |                             |  |  |
|---|--|-----------------|-----------------------------|--|--|
|   | words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)  | a               |                             |  |  |
| 2,  | (State or country under the law of which it is incorporated)  3. 36-402. 3828 (FEI number, If applicable)  |                 |                             |  |  |
|   | May 10, 1995  5. Perpetual  (Date of Incorporation)  5. Perpetual  (Duration: Year corp. will cease to exist of "perpetual")   |                 |                             |  |  |
| 6.  | None.  (Date first transacted business in b. vida (Sun secretors 607, 1501, 607, 1607, 2007, 1507, 160 | <del>10</del> - | · 9                         |  |  |
| 7.  | 31W399 Schoger Rd, Bldg, B   | 5KA 13          |                             |  |  |
|   | Naperville IL 60564 (Current mailing address)  | ت<br>ت          | FILED<br>TARY OF<br>CF CORE |  |  |
|   | Asphalt Maintenance (Purpose(s) of corporation authorized in home state ci country to be carried out in the state of Florida)  | ė<br>į          | F STATE<br>PORATIONS        |  |  |
| 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)  |  |                 |                             |  |  |
| Name: Shane Perreault   |  |                 |                             |  |  |
| Office Address: 7808 Clubhouse Estates Dr   |  |                 |                             |  |  |
|   | Orlando, Florida, 32 8-19 (Zip Code)   |                 |                             |  |  |
| 10  | Registered agent's acceptance: (Zip Code)  |                 |                             |  |  |
| 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 agent agent. |  |                 |                             |  |  |

11. 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.

(Registered agent's signature)

and accept the obligations of my position as registered agent.

12. Names and addresses of officers and/or directors: (Street address ONLY- P. O. Box NOT acceptable) A. DIRECTORS (Street address only-P. O. Box NOT acceptable) Chairman: Alchurk Address: \_ Aurora IL 60505 Vice Chairman: \_\_\_\_\_\_ Address: Director: \_ Address: Director: \_\_\_\_\_ Address: \_\_ B. OFFICERS (Street address only- P. O. Box NOT acceptable) President: //ichara Address: 1027 6050.5 Vice President: Jerry Address: 60538 Address: 60435 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) and Webster President
(Typed or printed name and capacity of person signing application)

## File Number \_ 5833-351-4



I, George H. Ryan. Secretary of State of the State of Illinois,



| In Testimony MI                                   | perrof. I hereto set |  |  |  |
|---|----------------------|--|--|--|
| my hand and cause to be affixed the Great Seal of |                      |  |  |  |
| the State of Illinois this                        | 29TH                 |  |  |  |
| day of APRIL                                      | A.D., 19_96.         |  |  |  |

Swy H Ryan 1 1916