

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

F98000004322

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

1

DOCUMENT #

F98000004322

00 JUL 21 PM 4:47

1. Corporation Name

D.K.J. Co. of Illinois

2. Principal Office Address

220 Eastern Ave.,

3. Mailing Office Address

220 Eastern Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

7/29/1988

City & State

Barrington, Illinois

City & State

Barrington, Illinois

5. FEI Number

363907518

Applied For

Not Applicable

6. 60010

Country

USA

Zip 60010

Country

USA

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Laura E. P...

Date **7-21-00**

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Corp sec	Kevin Tobin	633 W. Fullerton	Chicago IL 60614
Pres	Daniel Tobin	220 Eastern Ave	Chicago IL 60614
			Barrington 60010

REINSTATEMENT 1999-2000

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10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Daniel C. Tobin 7/17/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

847 948 6925

9-3-93



F98000004322

(2)

ACCOUNT NO. : 072100000032

REFERENCE : 772266 9725B

AUTHORIZATION :

Patricia Papp

COST LIMIT : \$ 917.50

ORDER DATE : July 21, 2000

ORDER TIME : 2:20 PM

ORDER NO. : 772266-015

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CUSTOMER NO: 9725B

CUSTOMER: Doug Lewis, Esq
Roetzel & Andress
Trainon Centre, Third Floor
850 Park Shore Drive
Naples, FL 34103

REINSTATMENT

NAME: D.K.J. CO. OF ILLINOIS

FILE 2ND

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX _____ CERTIFIED COPY
_____ PLAIN STAMPED COPY
XX _____ GOOD STANDING

CONTACT PERSON: Jeanine Reynolds EXT 1133

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 JUL 21 PM 4:47

RECEIVED
00 JUL 21 PM 3:11
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA