To: Qualification Tax sign	
Division of Corporation SUBJECT:	Name of corporation - must include suffix)
Dear Sir or Madam:	(Name of corporation - must include surfax)
The enclosed "Application by F "Certificate of Existence", and c transact business in Florida.	oreign Corporation for Authorization to Transact Business in Florida", check are submitted to register the above referenced foreign corporation to
Please return all correspondence	concerning this matter to the following: 800002F52378-01050-004
	Thomas E. Swartz ****131.25 *****131. (Name of Person)
	J.J. Swartz Co.
	(Firm/Company)
	2120 N. Oakland AUE
	(Address)
	Decatur, IL. 62526
	(City/State/Zip) W98-2240
	ne concerning this matter, please call:
EVELYN YOWE	EU at (217) 877-2613
(Name of Person)	(Area Code & Daytime Telephone Number)
COURIER ADDRESS:	MAILING ADDRESS: MAILING ADDRESS: MAILING ADDRESS: MAILING ADDRESS: MAILING ADDRESS:
Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	The state of the s



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

October 1, 1998

THOMAS A. SWARTZ J.J. SWARTZ CO. 2120 W. OAKLAND AVE DECATUR, IL 62526

SUBJECT: J.J. SWARTZ CO. Ref. Number: W98000022400

We have received your document for J.J. SWARTZ CO. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

The name on line 1 of your application must match the name exactly as it appears on your certificate from Illinois, which is as it appears at the top of this letter. Please remove the extraneous "Incorporated" from line 1.

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) 487-6958.

Lee Rivers **Document Specialist**

Letter Number: 998A00049045

Please see revised form attacked.

Please see revised form attacked.

Contact us if anyother Corrections are

Contact us if anyother Corrections are

Livelyn Yource

Division of Contact

Livelyn Yource

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

REGISTER A	FOREIGN CORPO	JN 607.1303, FLORID RATION TO TRAÑSA(A STATUT CT BUSINI	ES. THE FOLLOWIN ESS IN THE STATE C	NG IS SUBMIT DF FLORIDA.	TED TO
(Name of co	corporation; must inclu- obreviations of like imp	de the word "INCORPO port in language as will out so contained in the name	clearly indic	ate that it is a corporation	PRATION" or on instead of a	
2	ILLINOIS	which it is incorporated)	3	37-10965	49	
(State or con	mtry under the law of	which it is incorporated)	1	(FEI number,	, if applicable)	
4	1981	5		Bu	A-TIL A	1
1	(Date of incorporation)	(Duration:	Year corp. will cease t	o exist or "perp	etual")
(Date	first transacted busine	ss in Florida.) (SEE SEC	TIONS 607	.1501, 607, 1502, and 81	7 155 F Spice	<u> </u>
		2/20 N			ŽEC.	98 00
·	****	Decatu	n FL	62526	TAIN ASS	23 =
		(Current mailing	address)		m _o	≥ III
8. RESIC	DENT/AL L ose(s) of corporation a	Commencia uthorized in home state	Con country to	STRUCTION .	L Rengi	STOVE
9. Name and	street address of Fl	orida registered agen	t: (P.O. B	ox or Mail Drop Box	NOT acceptal	ole)
Name:	F.GLE	NN TUCK	RR.			
Office Address	: 950 N, Cc	ollier Blud	Ste 20	H		
	MARCO	TSLAND	, F	lorida, 34/45	-	
				(Zip code)	•	
10. Registered	d agent's acceptanc	e:				
comply with the	on, I hereby accept in provisions of all state poligations of my posit	ent and to accept service e appointment as registe etes relative to the prope tion as registered agent. (Registered agent's	ered agent a	nd avree to act in this .	canacity I time	tha aanaa
11. Attached is a Department of Story of which it is income.	tate, by me secretary	ice duly authenticated, no of State or other official	ot more than having custo	190 days prior to delive ody of corporate record	ery of this applic s in the jurisdic	cation to the tion under the !

of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

	CTORS (Street address omy - P.O. Box NOT acceptable)
	Thomas E. Swaltz
Address:	2120 N. DakLAND AVE
	Decatur, IL 62526
Vice Chai	man: Donna K. Swaltz
	1031 W. Mound Rd
	Decatur, IL 62526
	Kenneth Klein
Director.	1660-J E. 11st St
Address:	1660-J E. 11st St TWSa. OK 74136 PAGE AND ALLAHAS
Director:	AHC CREETA
Address:	<u>ဟု ၃ ယ ၂-</u>
P OFFI	CERS (Street address only - P.O. Box NOT acceptable)
	CERS (Street address only - P.O. Box NOT acceptable)
	Thomas E Swufe
Address: _	2120 N. Oakland AUE
-	Decatur, 71 62526
	ient: Donna K Swartz
Address: _	1031 W. Mound Ra
_	Decatur FL. 62526
Secretary:	SUELYN I YOWELL
Address: _	stoned Balla i Dand I I
_	Dieatur, Il 62521
Treasurer:	Thomas E. Swantz
Address: _	2120 M. DAKLAND AUE
	Decatur, IL 62526
- NOTE: -	
NOIE: E	f necessary, you may attach an addeptum to the application listing additional officers and/or directors.
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14	TT
	(Typed or printed name and capacity of person signing application)

File Humber_ 5235-615-6



do hereby certify that J. J. SWARTZ CO., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE APRIL 10, 1981, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS***



In Testimony Mhereof, I hereto set							
		be affixed the Great Seal of					
the State of I	Uinois this _	27TH					
day of	JULY						

George H Ryan SECRETARY OF STATE