9000004564 Address City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): ndustries Inc. (Corporation Name) (Document #) Walk in Pick up time Certified Copy ☐ Mail out ☐ Will wait Certificate of Status Photocopy NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation

Reinstatement

Trademark

Other

Examiner's Initials



August 30, 1999

LEXIS

TALLAHASSEE, FL

SUBJECT: ARLINGTON INDUSTRIES, INC.

Ref. Number: W99000020106

We have received your document for ARLINGTON INDUSTRIES, INC. and your check(s) totaling \$3535.00. However, the document has not been filed and is being retained in this office for the following:

Please note that we have RETAINED your \$3,535.00 payment.,

The name designated in your document is not available. corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc.,

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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

Buck Kohr Corporate Specialist

Letter Number: 099A00043267

ARLINGTON INDUSTRIES, INC. 1001 Technology Way Libertyville, Illinois 60048

Secretary of State State of Florida

Ladies and Gentlemen:

This letter will acknowledge that Arlington Industries, Inc., an Illinois corporation, elects to do business in the state of Florida under the assumed name Arlington Sales, Inc.

Sincerely,

Arlington Industries, Inc.

By:

Craig W. Funk

Its:

Chairman

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACTORIZATION TO TRANSACTORIZATIO

IN COMPLIANCE REGISTER A FOR	WITH SECTION 607.1503, FLORIDA EIGN CORPORATION TO TRANSAC	. STATU T BUSI	ITES, THE FOLLO NESS IN THE STAT	WING IS SUBMIT TE OF FLORIDA.	TED TO	
. Arlino	gten Industries, Inc.	_		-		
(Name of corpora	tion; must include the word "INCORPORA- tions of like import in language as will clear partnership if not so contained in the name	ariy inoi	cate that it is a corpor	PORATION" or ation instead of a	. 5	S G
. Illinois	s	<u>_3</u> .	36-319970	5 ber, if applicable)		1
(State or country u	sunder the law of which it is incorporated)		(FEI numl	per, if applicable)		
4 August (Perpetual			- <u>\$</u> 200
7.	of incorporation) (I	Duration	: Year corp. will cea	se to exist or "perpen	uai")	
6 August :	1996		4-1-00	1017 155 753	· · · · · · ·	.co = 7
(Date first t	ransacted business in Florida.) (SEE SECT	TIONS 6	07.1501, 607.1502 ai	1d 81 /.155, F.S.)		
71001 Te	danology Way	-,				
Liberty	ville, IL 60048					
(Purpose(s	n of conputer related products and so of corporation authorized in home state of set address of Florida registered agen	r countr	y to be carried out in		able)	,
Name: _	Lexis Document Services, Inc.	- 		x= -	3 E 5	· · · · · · · · e
Office Address:	3953 W.W. Kelley Road			· · · · · · · · · · · · · · · · ·		,
Office Madress.	Tallahassee		, Florida,323	11		igasiy r
•	<u> </u>	-44 5. **	(Zip code	;)		
	gent's acceptance: d as registered agent and to accept service	e of proc	ess for the above sta	ted corporation at th	e place desig	nated in omply
this application, I I with the provisions the obligations of n	of all statutes relative to the proper and composition as registered agents (Registered agent	complete t's signa	performance of my	duties, and I am fam	niliar with and	d accept
11. Attached is a c Department of Stat	ertificate of existence duly authenticated, ne, by the Secretary of State or other official	not more I having	than 90 days prior to custody of corporate	delivery of this applirecords in the jurisdi	ication to the ction under the	ne law of

which it is incorporated.

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

Chairman: _	Craig W. Funk	
Address:	1001 Technology Way	
	Libertyville, IL 60048	<u> </u>
Vice Chairm	an:	99
	·-	SE SECTION
•		2 000
	-	ORLE S
		51 00
		
— Directors	-	
	-	
Address:		, <u>, .</u>
B. OFFICE	ERS (Street address only - P.O. Box NOT acceptable)	
President:	Craig W. Funk	
Address:	1001 - 1 7	
	Libertyville, IL 60048	·
Vice Presider	n‡•	3433
	nt;	
Address:		
_	Craig W. Funk	
Secretary:		
Address:	(Same as above)	,
Treasurer:	Craig W. Funk	
Address:	(Same as above)	<u></u>
NOTE: If m	ecessary, you may attach an addendum 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)	
. Crai	g W. Furk, Chairman	
14	(Typed or printed name and capacity of person signing application)	

File Number ____ 5281-313-1



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do



In Testimony Whereof, I, hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this

AUGUST

A.D.

Desse White