F99000005346

TRANSMITTAL LETTER

To: Registration Sect Division of Corp			-
SUBJECT: ON	E Source	SUPPLY COM	PANY
		on - must include suffix)	17/110 9
Dear Sir or Madam:			
The enclosed "Applicatio "Certificate of Existence" transact business in Florid	n by Foreign Corporation for , and check are submitted to r da.	Authorization to Transact B egister the above referenced	susiness in Florida", I foreign corporation to
Please return all correspon	ndence concerning this matter	to the following: 2001	0029412226 -07/26/9901107001
-	GALE C. K	ARNIS	-U?/26/99U11U?U01 *****78.75_*****78.75_
	(Name of	Person)	<u> </u>
<u> </u>	LE SOURCE.	SUPPLY CO.	
	(Firm/Co	mpany) (96
_ 38	Walo WARRE	NVILLE RD.	00 ====================================
	(Addi	ress)	19 6
(J)A	IRRENVILLE	IL 60555	PH CALE
	(City/Sta	te/Zip)	H 2:
			: O
Should you need to call so	omeone concerning this matte	r, please call:	5
GALE KA	RNIS at (630) 393 - 3883	3
(Name of Person	(Area	Code & Daytime Telephone	e Number)
STREET ADDRESS:		MAILING ADDRESS:	W99-17678
Registration Section		Registration Section	ži.
Division of Corporations		Division of Corporations	*/
409 E. Gaines St. Tallahassee, FL 32399		P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the	e following amount:	•	<i>∑</i> •
□ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy

1. 70: AGNES LUNT



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

July 30, 1999

GALE C. KARNIS ONE SOURCE SUPPLY COMPANY 28W210 WARRENVILLE ROAD WARRENVILLE, IL 60555

SUBJECT: ONE SOURCE SUPPLY COMPANY

Ref. Number: W99000017678

We have received your document for ONE SOURCE SUPPLY COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the 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., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION DOCUMENT SPECIALIST indicated.

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

The document must have original signatures.

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) 487-6094. 8/11/99 - CAN NOT WE THIS NAME - AGNES

Agnes Lunt **Document Specialist**

Letter Number: 299A00038847

SAID TO TRY SOME-THING ECSE.

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

MAILED 8/18/99



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

PETURNED

3RD ATTEMPT

August 24, 1999

GALE C. KARNIS ONE SOURCE SUPPLY COMPANY 28W210 WARRENVILLE ROAD WARRENVILLE, IL 60555

SUBJECT: ONE SOURCE SUPPLY COMPANY

Ref. Number: W99000017678

We have received your document for ONE SOURCE SUPPLY COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 487-6094.

Agnes Lunt Document Specialist

Letter Number: 899A00042386

lorry, l'me never done this before, so please

be specific if it's still not correct or

tall me (630) 393-3883. Sharkyow,

Jack fornis

920/99



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 28, 1999

GALE C. KARNIS ONE SOURCE SUPPLY COMPANY 28W210 WARRENVILLE ROAD WARRENVILLE, IL 60555

SUBJECT: ONE SOURCE SUPPLY COMPANY

Ref. Number: W99000017678

We have received your document for ONE SOURCE SUPPLY COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 487-6094.

Agnes Lunt Document Specialist

Letter Number: 899A00047233

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

·	
I, the undersigned BRAD CARPENTER, do hereby certify	· · · · · · · · · · · · · · · · · · ·
that this Resolution of the Board of Directors of ONE SOURCE SUPPLY	· ·
(Corporate Name)	₹ #27
a corporation duly organized and existing under the laws of the State of	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
was duly adopted on $JULV$ $22ND$, 19 94 .	- ::- ::-
Be it resolved, that ONE SOUNCE SUPPLY (Corporate Name)	
organized and existing in the State of	The second secon
OSSCO, Inc. for use in Florida.	45
Dated: \$\(\frac{1P}{99}\)	
Signature of either Chairman, Vica Chairman or any officer	TA TA
Type or print name	D STATE

INHS19(4/96)

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. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" 1. 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.) (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida) 9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable) Office Address: 10. Registered agent's acceptance: 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 as registered agent. (Registered agent's signature) 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.

12. Names and	business addresses of officers and/or directors:	
A. DIRECTO	RS	· ·
Chairman:		
Address:		
Vice Chairman		
Address:		
Director:		
Address:		
Director:		
		73
B. OFFICE	RS	
President:	BRAD CARPENTER 551 CLARISSA CT.	34
Address:	NAPERVILLE, ZL 60540	يترم لسنة
	t:	
Address:		
Secretary:		
Address:		
Treasurer: _		
Address:		
NOTE: If i	necessary, 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)	
14	BRAD CARPENTER (Typed or printed name and capacity of person signing application)	*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

Desse White