

M180600069498

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

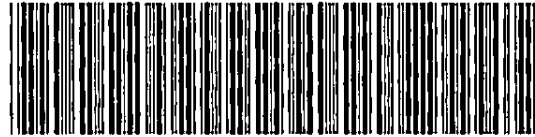
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 5, 2018

JOHN DEBRUYN  
8201 N UNIVERSITY ST  
PEORIA, IL 61615

SUBJECT: HARVARD DISTRIBUTION, LLC  
Ref. Number: W18000088569

We have received your document for HARVARD DISTRIBUTION, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Handwriting on application is illegible, please revise.

*SEE ATTACHMENT WITH TYPED INFORMATION*

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) 245-6051.

Dionne M Scott  
Regulatory Specialist II

Letter Number: 118A00020793

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COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HARVARD DISTRIBUTION, LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

JOHN DEBRUYN  
Name of Person

ADVANCED TECHNOLOGY SERVICES, INC  
Firm/Company

8201 N. UNIVERSITY ST.  
Address

PEORIA, IL 61615  
City/State and Zip Code

JDEBRUYN@ADVANCEDTECH.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN DEBRUYN at ( 309 ) 693-4000  
Name of Contact Person Area Code Daytime Telephone Number

**MAILING ADDRESS:**  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS  
IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. HARVARD DISTRIBUTION, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
- (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. ILLINOIS  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 32-0540857  
(FBI number, if applicable)
4. \_\_\_\_\_  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 8201 N. UNIVERSITY ST.  
(Street Address of Principal Office)  
PEORIA, IL 61615
6. 8201 N. UNIVERSITY ST.  
(Mailing Address)  
PEORIA, IL 61615

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: CORPORATION SERVICE COMPANY

Office Address: 1201 HAYS STREET

TALLAHASSEE

(City)

Florida 32301  
(Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company 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.

Holly Jones  
(Registered agent's signature)

Holly Jones  
Assistant Vice President

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

MANAGER

WILLIAM LUTZ  
8201 N UNIVERSITY ST  
PEORIA, IL 61615

MANAGER

JASON MONTGOMERY  
8201 N UNIVERSITY ST  
PEORIA, IL 61615

MANAGER

MICHAEL WALTRIP  
8201 N UNIVERSITY ST  
PEORIA, IL 61615

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

[Signature]  
Signature of an authorized person  
JOHN A. DEBURN  
Typed or printed name of signer

Line

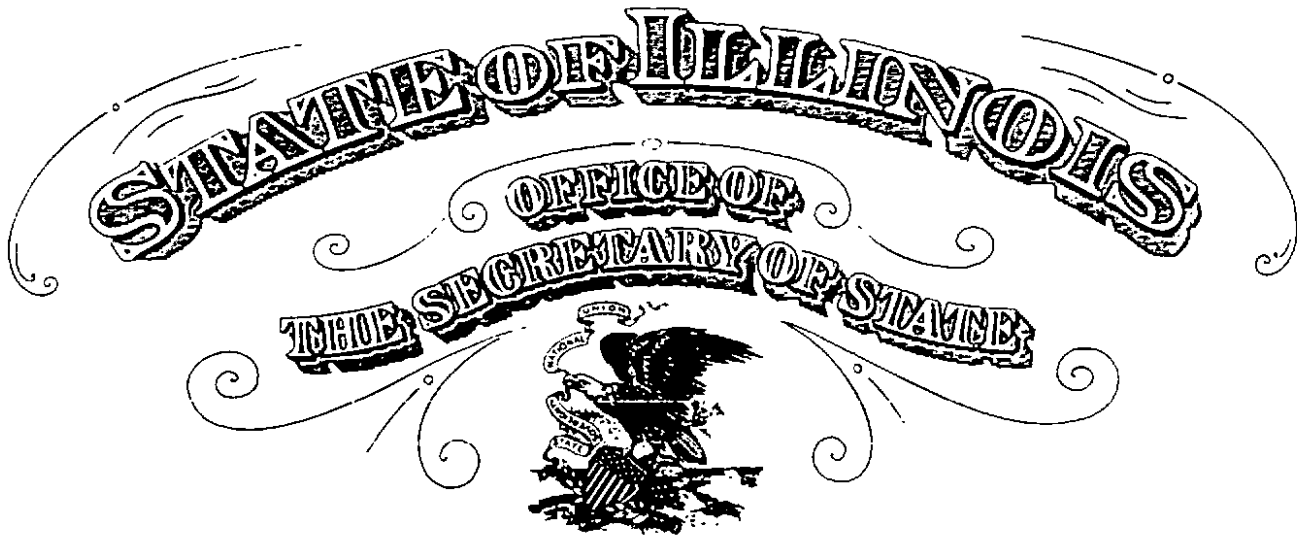
- 1 Harvard Distribution, LLC
- 2 Illinois
- 3 32-0540857
- 5 8201 N. University St  
Peoria, IL 61615
- 6 8201 N. University St  
Peoria, IL 61615
- 7 Corporation Service Company  
1201 Hays Street  
Tallahassee, FL 32301
- 8 Manager William Lutz  
8201 N University St.  
Peoria, IL 61615
- Manager Jason Montgomery  
8201 N University St.  
Peoria, IL 61615
- Manager Michael Waltrip  
8201 N University St.  
Peoria, IL 61615

FORM 991 22 P 1:36

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**To all to whom these Presents Shall Come, Greeting:**

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that*

HARVARD DISTRIBUTION, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON AUGUST 22, 2017, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY IN THE STATE OF ILLINOIS.



***In Testimony Whereof, I hereto set  
my hand and cause to be affixed the Great Seal of  
the State of Illinois, this 26TH  
day of JULY A.D. 2018 .***

*Jesse White*

SECRETARY OF STATE