

M24000008192

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

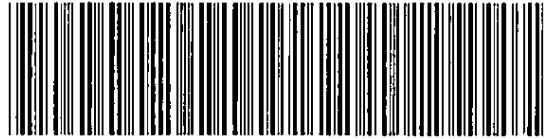
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500430647035

2024 JUN 25 11 21 AM

RECEIVED

2024 JUN 25 AM 3:36

SECRETARY OF STATE
MAIL ROOM

JUN 26 2024

K. Brumley

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 479081 4306193

AUTHORIZATION :

COST LIMIT : \$125.00

ORDER DATE : May 28, 2024

ORDER TIME : 1:03 PM

ORDER NO. : 479081-040

CUSTOMER NO: 4306193

FOREIGN FILINGS

NAME: CERTEX USA, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Miller -- EXT#

EXAMINER: _____

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CERTEX USA, 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:

Eileen C. Downes

Name of Person

Katten Muchin Rosenman LLP

Firm/Company

525 W. Monroe Street, Suite 1900

Address

Chicago, IL 60661-3693

City/State and Zip Code

eileen.downes@katten.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eileen C. Downes

Name of Contact Person

312

Area Code

577-8215

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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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

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. CERTEX USA, 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. Delaware 3. _____
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI 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. 1721 W. Culver St. 6. 1721 W. Culver St.
(Street Address of Principal Office) (Mailing Address)
Phoenix, AZ 85007 Phoenix, AZ 85007

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee , Florida 32301
(City) (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.


(Registered agent's signature)

2024.11.25 11:21:16

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

☒ Manager Name: Robert Jackson

☐ Member Address: 10 S. Wacker Dr.

☐ Authorized Ste. 3300, Chicago, IL 60606

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☒ Manager Name: David O. Hawkins

☐ Member Address: 10 S. Wacker Dr.

☐ Authorized Ste. 3300, Chicago, IL 60606

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: Brian P. Simmons

☐ Member Address: 10 S. Wacker Dr.

☐ Authorized Ste. 3300, Chicago, IL 60606

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: Charles W. Jaques

☐ Member Address: 10 S. Wacker Dr.

☐ Authorized Ste. 3300, Chicago, IL 60606

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: Dee Schweigert

☐ Member Address: 1721 W. Culver St.

☐ Authorized Phoenix, AZ 85007

Person _____

☐ Other _____ ☐ Other _____

☒ Manager Name: Glenn Evans

☐ Member Address: 1721 W. Culver St.

☐ Authorized Phoenix, AZ 85007

Person _____

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.

DocuSigned by:

Dee Schweigert

FD5B792A003A424...

authorized person

Dee Schweigert

Typed or printed name of signer

CSC 479081 040

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CERTEX USA, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF MAY, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CERTEX USA, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF APRIL, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



7425792 8300

SR# 20242545675

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203573278

Date: 05-29-24