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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: AMERITEMP L	TD. INC		
Name	of corporatio	n - must include suffix	
Dear Sir or Madam:			
The enclosed "Application by Foreign Co "Certificate of Existence," or "Certificate above referenced foreign corporation to to	OL GOOD Stai	iding" and check are co	act Business in Florida," abmitted to register the
Please return all correspondence concerni Brandi Morris	ng this matte	r to the following:	
	Name of	Person	
Harbor Compliance			
	Firm/Con	npany	
1830 Colonial Village Ln			
Lancaster, PA 17601	Addre	ess	
	City/State as	nd Zip code	
bmorris@harborcompliance			
E-mail address: For further information concerning this ma		or future annual report	notification)
Brandi Morris	, 717	_) 4907935	
Name of Person	Area Code	Daytime Telep	hone Number
STREET/COURIER ADDRESS Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	:	MAILING A Registration S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7
Enclosed is a check for the following amout Please make check payable to: FLORIDA DEF \$70.00 Filing Fee \$78.75 Filing Certificate of	PARTMENT (Fee &	OF STATE \$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION 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.

(If name unava	ilable in Florida, enter alternate corporate name ac	dopted for the purpose of transacting business in	Florida	-
2. Illinois	try under the law of which it is incorporated) 3.			
(State or coun	MAC			~
(Dat	te of incorporation)	(Date of duration, if other than perpetual)	-
6	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150	2. F.S., to determine penalty liability)		_
7.00141414	chmond Rd Johnsburg, IL 60	U51		~
	(i i iiicipai office	street address)	2	11
	(Current mailing address, if different)		祁	. 285 . 385 . 385
0.11				- 本森 - 飛見市
8. Name and stre	et address of Florida registered agent: (P.O. 1	Box NOT acceptable)	ဘ တ	
Name:	Registered Agents Inc		2 1:1-2	- 일었
Office Address:	7901 4th St N STE 300		PH 12: 25	시스 기수 기수
	St. Petersburg	— Florida 33702	٠.	ű.
	(City)	, Florida 33702 (Zip code)		
further agree to c	ent's acceptance: ned as registered agent and to accept service application, I hereby accept the appointment omply with the provisions of all statutes relatives with and accept the obligations of my positions.	nt as registered agent and agree to act in thi	•	
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11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

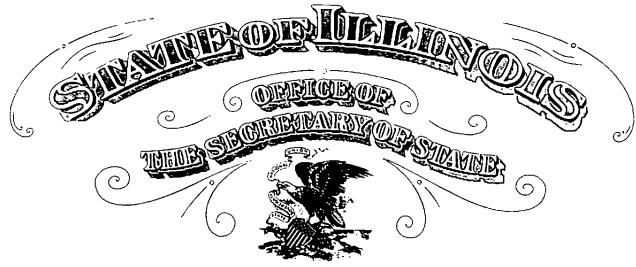
A. DIRECTORS	3		
□Chairman	Name: BOBBIE CAVANESS	□ Chairman	_{Name:} Alan Favia
□Vice Chairman	Address: 3314 N Richmond Rd	□Vice Chairman	Address: 3314 N Richmond Re
☑ Director	Johnsburg, IL 60051	☑ Vice Chanman ☑ Director	Johnsburg, IL 60051
☑ President		□President	
□Vice President		☑ Vice President	
☐ Secretary	□Treasurer		
Other	·	□Secretary □Other	□ Treasurer □ Other
FIG. :			
	Name:	□ Chairman	Name:
□Vice Chairman	Address:	□Vice Chairman	Address:
□Director		□ Director	
□ President _		□President	
□Vice President _		□Vice President	
□Secretary	□Treasurer	☐ Secretary	□Treasurer
□Other	Other	□Other	
□Chairman 1	Name:	□Chairman N	Name:
	Address:		Address:
□Director _		Director	idaces.
□President		President	
□Vice President		□Vice President	
Secretary	□Treasurer	☐ Secretary	□Treasurer
Other	Other	□Other	Other
Important Notice: Use individuals may be ad 12.	e an attachment to report more than six (6). The attachment to the index when filing your Florida Departm Bobbis Cavansas	ent of State Annual Repor	or reporting purposes only. Non-indexed rt form.
	Signature of Director of Signature of Director of Signature of Director of Signature of Director of Di		

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that 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.

13. BOBBIE CAVANESS, President

File Number

5850-140-9



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, 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

AMERITEMP LTD., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON SEPTEMBER 13, 1995, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION 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 11TH

day of DECEMBER A.D. 2024

Authentication #: 2434601978 verifiable until 12/11/2025

Authenticate at: https://www.ilsos.gov

SECRETARY OF STATE



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to register a foreign profit corporation to transact business in Florida. The requirements are as follows:

- Pursuant to section 607.1503(1), Florida Statutes, the attached application must be completed in its entirety.
- The corporation must submit an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of corporate records in the state or country under the law of which it is incorporated. A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.
- There is a \$70.00 registration fee and a letter of acknowledgment will be issued free of charge upon registration.
- Certification fees are <u>optional</u>. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy of the application is \$8.75 (plus \$1 per page for each page over 8, not to exceed a maximum of \$52.50). Please check the appropriate box on the COVER letter and send one check for the total amount made payable to the Florida Department of State.
- The COVER letter included in this packet should be completed and submitted along with the certificate, application and check. Both the mailing address and courier address are noted in the COVER letter.
- Important Information About the Requirement to File an Annual Report
 All Profit Corporations must file an Annual Report yearly to maintain "active"
 status. The first report is due in the year following formation. The report must be filed
 electronically online between January 1st and May 1st. The fee for the annual report is
 \$150. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual
 Report Reminder Notices" are sent to the e-mail address you provide us when you submit
 this document for filing. To file any time after January 1st, go to our website at
 www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051 or writing the Registration Section, Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314.