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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

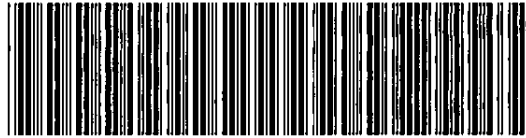
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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PS - 7/20/11

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SIGNATURE RETAIL SERVICES, INC.
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

MICHAEL CHIAPPETTA
Name of Person

SIGNATURE RETAIL SERVICES, INC.
Firm/Company

793 SPRINGER VE
Address

LOMBARD, ILLINOIS 60148
City/State and Zip code

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

For further information concerning this matter, please call:

MICHAEL CHIAPPETTA at (630) 678-1212
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Enclosed is a check for the following amount:

- \$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

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.

1. SIGNATURE RETAIL SERVICES, INC
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. ILLINOIS 3. 20/2010363
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/08/2005 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. HAVE NOT BEGUN YET
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 793 SPRINGER DRIVE, LOMBARD, IL 60148
(Principal office address)

793 SPRINGER DRIVE LOMBARD, IL 60148
(Current mailing address)

8. RETAIL CONSTRUCTION
(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 NOT acceptable)

Name: JENNA BUELL

Office Address: 12542 SPARKLEBERRY RD.

TAMPA, Florida 33626-3065
(City) (Zip code)

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.

Jenna Buell
(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.

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12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: DAN PERRY

Address: 793 SPRINGER DRIVE
LOMBARD, ILLINOIS 60148

Vice Chairman: _____

Address: _____

Director: STEPHEN IGNOFFO

Address: 793 SPRINGER DRIVE
LOMBARD, ILLINOIS 60148

Director: MICHAEL CHIAPPETTA

Address: 793 SPRINGER DRIVE
LOMBARD, ILLINOIS 60148

B. OFFICERS

President: DAN PERRY

Address: 793 SPRINGER DRIVE
LOMBARD, ILLINOIS 60148

Vice President: _____

Address: _____

Secretary: STEPHEN IGNOFFO


Address: 793 SPRINGER DRIVE, LOMBARD, ILLINOIS 60148

Treasurer: MICHAEL CHIAPPETTA

Address: 793 SPRINGER DRIVE, LOMBARD, ILLINOIS 60148

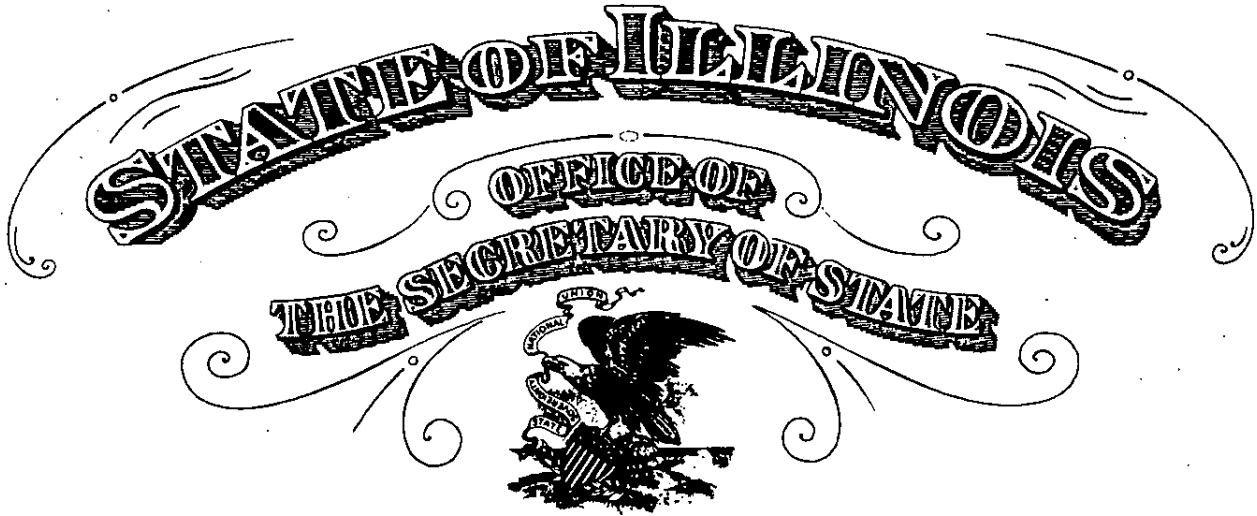
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NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 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.

14. MICHAEL CHIAPPETTA VICE PRESIDENT OF FINANCE
(Typed or printed name and capacity of person signing application)



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

SIGNATURE RETAIL SERVICES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON FEBRUARY 08, 2005, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THE DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.

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In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 13TH day of JULY A.D. 2011



Authentication #: 1119401412

Authenticate at: <http://www.cyberdriveillinois.com>

Jesse White

SECRETARY OF STATE