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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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SECIETY OF STATE

T. BURCH JUL 26 700.

COVER LETTER

TO: New Filing Section Division of Corporations								
SUBJECT: ENG Group, Inc.								
(Name of corporation - must include suffix)								
Dear Sir or Madam:								
The enclosed "Application by Foreign Corporation for Authoriza "Certificate of Existence," and check are submitted to register the transact business in Florida.								
Please return all correspondence concerning this matter to the fo	llowing:							
Mircea Maghiari	<u> </u>							
(Name of Person)								
ENG Group, Inc.								
(Firm/Company)								
2592 Twilight View	— a la l							
(Address)								
Snellville, GA 30078								
(City/State and Zip c	ode)							
For further information concerning this matter, please call: Mitch Maghiari at (770) 573	3-3537							
	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:								
	Filing Fee & S87.50 Filing Fee, ed Copy Certificate of Status & Certified Copy							



July 17, 2006

MIRCEA MAGHIARI 2592 TWILIGHT VIEW SNELLVILE, GA 30078

SUBJECT: ENG GROUP, INC. Ref. Number: W06000031658

We have received your document for ENG GROUP, INC. 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 of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc.," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6928.

Letter Number: 906A00045674

Tim Burch Document Specialist

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. ENG Gro	up, Inc		
	corporation; must include "INCORPORA Corp," "Inc," "Co," or "Corp.")	RATED," "COMPANY," "CORPORATION,"	-
		GROUP, INC.	
(If name unavai	lable in Florida, enter alternate corporate	te name adopted for the purpose of transacting business in Florida)	
_{2.} Georgia		_{3.} 20-3016397	
	under the law of which it is incorporated		: = .
4. 06/07/200)5	₅ Perpetual	
	e of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	. # . E*
6. N/A			
v		siness in Florida, if prior to registration) & 607.1502, F.S., to determine penalty liability)	•
₇ 2592 Twill	ight View, Snellville GA 3	30078	-
/·	(Principal offic		٠.
2592 Twil	ight View, Snellville GA 3	30078	
	(Current mailin		
	g Engineering	AHASS	FIL
(Purpose(s) of corporation authorized in home stat	ate or country to be carried out in state of Florida)	ED
9. Name and stre	et address of Florida registered agent	nt: (P.O. Box NOT acceptable)	
Name:	NRAI Services, Inc.	THE STATE OF	
Office Address:	2731 Executive Park D	Orive. Suite 4	,
	Weston	, Florida 33331	
	(City)	(Zip code)	
in Donistared a	aont's occentance		

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)

(Registered agent's signature)

(Registered agent's signature)

(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. DIREC								
Chairman:	N/A		<u> </u>		·			
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Vice Chairm	an: N/A					,-		
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Director	I/A	<u></u>	· **			- S E S≥		-
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Address:			<u></u>	:	make 1º48	- F.S.	_ <u>}</u> C	1
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B. OFFIC	ERS							
President:	Mircea Maghiari	<u>,,, ,=, ==,_</u>		else de qu	<u> </u>	<u> </u>	<u> </u>	
Address: 2	592 Twilight View, Snellville.	GA 30078		<u> </u>	<u>. 1177 3</u>	·	in yardi.	<u>_</u> - :
				<u></u>	<u> </u>		· ·	
Vice Preside	nt: N/A	<u> </u>	·		<u> </u>	= 3.2 - 3	10	
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Sacratanii (Seorgeta Maghiari			عدر جيئيد		2.25	F. F	<u>-</u> -
	592 Twilight View, Snellville	GA 30078	- 20					∸'
	/lircea Maghiari	<u> </u>				- ; ;		<u>-</u>
	592 Twilight View, Snellville					<u> </u>		_
Address: _				<u></u>	<u> </u>			<u> </u>
NOTE: If	necessary, you may attach an addendum to	the application	listing a	ditional of	ficers and/or	directors	i.,	
13	Lay biavi						. * →	1 1
	(Signature of Director or Office	r listed in numbe	er 12 of	the applicat	ion)	<u> </u>		
14. Mirce	ea Maghiari - President						· · · · · ·	
	(Typed or printed name and ca	apacity of persor	n signing	g application	n)			

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Control No. 0540615

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STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

CERTIFICATE OF EXISTENCE

I, Cathy Cox, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

ENG GROUP, INC.

Domestic Profit Corporation

was formed or was authorized to transact business on 06/07/2005 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 5th day of July, 2006

Cathy Cox Secretary of State

Certification Number: 164460-1 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp