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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

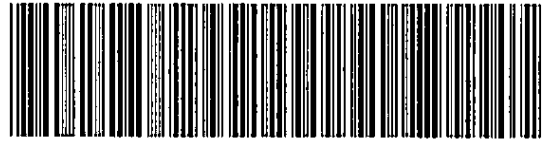
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 18, 2021

KARIM KHOJA  
225 ARIANA DR  
BARTLETT, IL 60103

SUBJECT: RELIABLE HEATING & COOLING INC.  
Ref. Number: W21000114078

We have received your document for RELIABLE HEATING & COOLING INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name and title of the person signing the document must be noted beneath or opposite the signature.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Suzanne Hawkes  
Regulatory II

Letter Number: 821A00019789

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RELIABLE HEATING & Cooling 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:

KARIM KHOJA.  
Name of Person

Reliable heating & Cooling Inc.  
Firm/Company

225 ARIANA DR  
Address

BARTLETT, IL- 60103.  
City/State and Zip code

KBKHOJA@gmail.com.  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KARIM KHOJA at ( 630 ) 673-6251.  
Name of Person Area Code Daytime Telephone Number

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Enclosed is a check for the following amount:

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

- \$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. Reliable heating & Cooling 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. 36-4471309
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. Sept 6th 2001 5. N/A
(Date of incorporation) (Date of duration, if other than perpetual)

6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 225 ARIANA DR, BARTLETT, IL - 60103
(Principal office street address)

2950 Summer Swan Dr, Orlando, FL - 32825
(Current mailing address, if different)

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

Name: KARIM KHOJA

Office Address: 2950 Summer Swan Dr

Orlando, Florida 32825
(City) (Zip code)

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TALLAHASSEE, FL

9. 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.

[Handwritten signature]
(Registered agent's signature)

KARIM KHOJA

10. 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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: Luis Contreras

Chairman Name: Epifanio Gonzalez.

Vice Chairman Address: 8654 Black Mesa Dr

Vice Chairman Address: 2950 Summer Swan Dr

Director Orlando, FL-32829.

Director Orlando, FL-32825.

President \_\_\_\_\_

President \_\_\_\_\_

Vice President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Other Manager  Other \_\_\_\_\_

Chairman Name: KARIM KHOJA.

Chairman Name: \_\_\_\_\_

Vice Chairman Address: 2950 Summer Swan Dr

Vice Chairman Address: \_\_\_\_\_

Director Orlando, FL-32825

Director \_\_\_\_\_

President \_\_\_\_\_

President \_\_\_\_\_

Vice President \_\_\_\_\_

Vice President \_\_\_\_\_

Secretary  Treasurer

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

Other \_\_\_\_\_  Other \_\_\_\_\_

Chairman Name: \_\_\_\_\_

Chairman Name: \_\_\_\_\_

Vice Chairman Address: \_\_\_\_\_

Vice Chairman Address: \_\_\_\_\_

Director \_\_\_\_\_

Director \_\_\_\_\_

President \_\_\_\_\_

President \_\_\_\_\_

Vice President \_\_\_\_\_

Vice President \_\_\_\_\_


Secretary  Treasurer

Secretary  Treasurer

Other \_\_\_\_\_  Other \_\_\_\_\_

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.

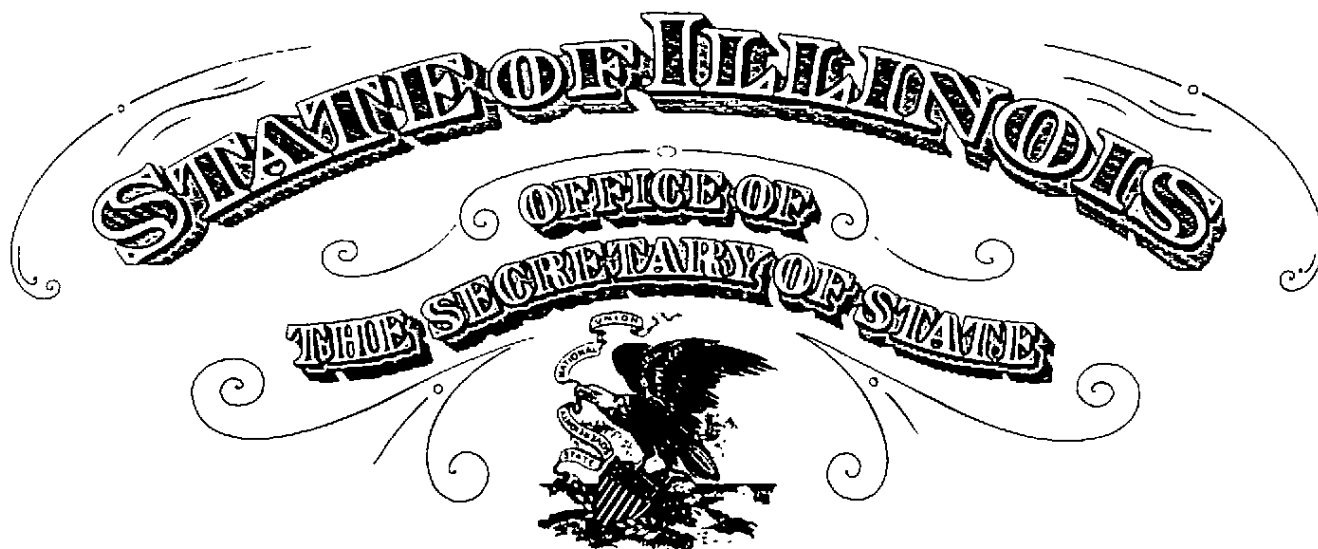
12.   
Signature of Director or Officer

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. KARIM KHOJA  
(Typed or printed name and capacity of person signing application)

File Number

6181-271-7



**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*

RELIABLE HEATING & COOLING INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON SEPTEMBER 06, 2001, 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 27TH day of JULY A.D. 2021 .***

*Jesse White*

SECRETARY OF STATE