## To: Registration Section Division of Corporations

Division of C				.4	100
211151011 01 0	•			7	
SUBJECT:	Myers S	ervice Inc.			
	/ (Name of cor	ervice, Inc. poration - must include suffi	x)		<del></del> -
Dear Sir or Madam:					
The enclosed "Applic "Certificate of Exister transact business in Fl	ice, and check are submitt	on for Authorization to Transed to register the above refer	sact Business i	in Florida", corporation	to
Please return all corre	spondence concerning this	matter to the following:			
		nole ame of Person)			
	(Na	me of Person)		•	
	Myers Ser	lice Time			
	/ (Fir	m/Company)	··········		
	_2076 N. Els	ston Ave: Sta 20	$\overset{\circ}{\sim}$		
		(Address)	<u> </u>		-
	Chicago D	5ton Ave., Ste-20 (Address) 606/4-3940 ty/State/Zip)			
	(Ci	ty/State/Zip)			
	l someone concerning this			1.75 ***	11——5 1—017 •∗78.75
Anna Canole IF	erry Myers at (7)	73 <u>) 342-8300</u> Area Code & Daytime Telep			
(Name of Pers	on)/	Area Code & Daytime Telep	ohone Number	<del></del>	, 1
				_•	W1/7
STREET ADDRESS:		MAILING ADDRES	SS: 5	SECRE	
Registration Section		Registration Section	5	TAR SSSA	
Division of Corporation 409 E. Gaines St.	S	Division of Corporation	ons	<u>~</u> <	TT
Tallahassee, FL 32399		P.O. Box 6327  -Tallahassee, FL 3231	1	A FLOR	U
Enclosed is a check for t	the following amount:	1 and 1 5251	•	TATE ORIDA	
☐ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy	S87.50 F	iling Fee, ate 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. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.) 2. Tllinois
(State or country under the law of which it is incorporated)

3. 36-3096487
(FEI number, if applicable)

4. July 23, 1980
(Date of incorporation)

5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual") (Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.") (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 2076 N. Elston Ave., Ste. 200, Chicago IL 60614-3940 (Principal office address) 2076 N. Elston Ave. Ste 200 Chicago II 60614-3940 (Current mailing address) Private Investigations
(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 or Mail Drop Box NOT acceptable) 504 N. Dixie Freeway

Snyrna Beach, Florida 3/268

(Zip code) Office Address: 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.

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.

(Registered agent's signature)

12. Names and business addresses of officers and/or directors:	
A. DIRECTORS	
Chairman:	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: Percy Myers	
Address: 2076 N. Elston Ave, Ste. 200	SECO.
Chicago Il 60614-3940	
Vice President: Perry Myers	SET A
Address: Same as above -	FLOR
	TIDA S
Secretary: Perry Myers	
Address: Sanc_ as above = =	
Treasurer: Perry Myers	
Address: - Same as above -	-
NOTE: If necessary, you may attach an addendum to the application listing additional officers and	/or directors
3	of directors.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the a	pplication)
4. Perry Myers Resident  (Typed or printed name and capacity of person signing application)	
(1 yped or printed name and capacity of person signing application	n)

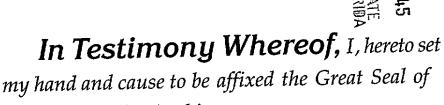
File Number \_\_\_\_\_\_5211-708-9

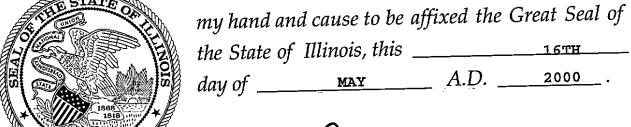


## To all to whom these Presents Shall Come, Greeting:

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

MYERS SERVICE. INC., A DOMESTIC CORPORA





Desse White