FOLOGOBALLOY TRANSMITTAL LETTER

TO:

Registration Section

Division of Corpora	HOUS		
SUBJECT: Cy	berstainless Corp		
		on - must include suffix)	
Dear Sir or Madam:			
The enclosed "Application be "Certificate of Existence", a to transact business in Florid	nd check are submitted to		
Please return all corresponde	ence concerning this matte	er to the following:	-
<u>Chhotalal A. Pat</u>			
	(Name o	of Person)	
Cyberstainless C	orp		
457 St. Paul Bou	,	ompany) 1 🖸	00037989018 -03/05/0101135013 *****87.50 *****87.50
	(Add	iress)	
Carol Stream, IL	60188		MO1-202C
outor scream, re		and Zip code)	
For further information cond	erning this matter, please	call:	
Chhotalal Patel	at (630) 510-9200	프위 으
(Name of Person)		Code & Daytime Telephon	e Number)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	
Enclosed is a check for the f	ollowing amount:		- 5/1s
□ \$70.00 Filing Fee □	\$78.75 Filing Fee & Certificate of Status	3 \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

March 6, 2001

CHHOTALAL A PATEL 457 ST PAUL BLVD CORAL STREAM, IL 60188

SUBJECT: CYBERSTAINLESS CORP.

Ref. Number: W01000005056

We have received your document for CYBERSTAINLESS CORP. and your check(s) totaling \$87.50. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc. Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 801A00013591

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.		erstainless Corp				
	(Name of corpor	ration; must include the word "INCORPOR	RATE	D", "COMPANY", "CORPORATION" or		
	words or abbrev	iations of like import in language as will c	learly	indicate that it is a corporation instead of a		
	natural person o	r partnership if not so contained in the nam	ne at p	present.)		
2.	1111	inois	3.	36-4406544		
	. Illinois 3. (State or country under the law of which it is incorporated)		(FEI number, if applicable)			
4.	Nove	ember 15, 2000	5.	Perpetual		
(Da		te of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	etual")	
6.		Qualification				
1	(Date first transa	cted business in Florida. If corporation ha	s not	transacted business in Florida, insert "upon qualification.")		
		(SEE SECTIONS 607.	1501,	607.1502 and 817.155, F.S.)		
7.	457	St. Paul Boulevard, Carol Str	eam.	, Illinois 60188		
••		(Principal office				
	Same					
		(Current mailing	addr	ess)	-	
8.	Sale	of fabricated steel				
		s) of corporation authorized in home state	OF COL	untry to be carried out in state of Florida)		
_	37	-4-31				
У.	Name and str	eet address of Florida registered age	ent:	(P.O. Box or Mail Drop Box NOT acceptable)		
	Name:	Douglas J. Edwards, Sr.				
		14558 Anchorage Circle				
Ot	ffice Address:	14000 Amenorage officie				
		Seminole		.Florida 33776-1113585		
		(City)				
		49				

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.

PLEASE SIGN — Douglas J. Edwards, S. Registered agent's signature) Douglas J. Edwards, S.

11. Attached is a certificate of existe the 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	rors				
Chairman: _					
Address:					
Vice Chairma	in:				
·					
Director:					
Director:					-
					
B. OFFICE				·	-
President:	Chottalal Patel				
Address:	457 St. Paul Boulevard	32	01		
	Carol Stream, IL 60188		TAY TAY		
Vice Presider	it:		<u> </u>		
				1 4 - 2-4 - 2-2	
			i.o i		
Secretary:	Satish C. Patel				
Address:	457 St. Paul Boulveard, Carol Stream, IL 60188				
Treasurer:	Same as Secretary			•	
Address:					
*	•				
	ecoscation way attach an addendum to the application listing additional office	rs and/or di	irecto	s.	
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of	the applica	ation		 .
14	Chhotalal Patel, President	are apprice	~~~~ <i>}</i>		
- T-	(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



Desse White

SECRETARY OF STATE