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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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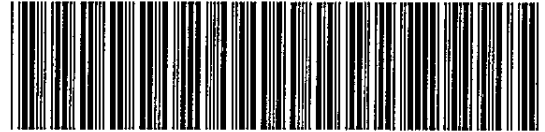
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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September 22, 2003

TRANSMITTAL LETTER

VIA FEDERAL EXPRESS

TO: Registration Section
Division of Corporations

SUBJECT: CATALYST CONTRACTING, 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", 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:

TYRA N. READ, ESQ.

(Name of Person)

HENDERSON, FRANKLIN, STARNES & HOLT, P.A.

(Firm/Company)

P.O. BOX 280

(Address)

FORT MYERS, FL 33902-0280

(City/State and Zip code)

For further information concerning this matter, please call:

TYRA N. READ

(Name of Person)

at (239) 334-4121

(Area Code & Daytime Telephone 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 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**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. CATALYST CONTRACTING, 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

(State or country under the law of which it is incorporated)

3. 36-4062072

(FEI number, if applicable)

4. JANUARY 23, 1996

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION

(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.)

7. 4700 GILBERT AVENUE, SUITE 47, WESTERN SPRINGS, ILLINOIS 60558

(Principal office address)

4700 GILBERT AVENUE, SUITE 47, WESTERN SPRINGS, ILLINOIS 60558

(Current mailing address)

8. The transaction of any and all lawful business for which a corporation may be incorporated.

(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)

Name: **JOSHUA SPENGLER**

Office Address: **5313 SW 8TH PLACE**

CAPE CORAL

(City)

, Florida **33914**

(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.


(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:

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TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: **STANLEY A. SIKORA**

Address: **4700 GILBERT AVENUE, SUITE 47**

WESTERN SPRINGS, ILLINOIS 60558

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: **STANLEY A. SIKORA**

Address: **4700 GILBERT AVENUE, SUITE 47**

WESTERN SPRINGS, ILLINOIS 60558

Vice President: _____

Address: _____

Secretary: **STANLEY A. SIKORA**

Address: **4700 GILBERT AVENUE, SUITE 47, WESTERN SPRINGS, ILLINOIS 60558**

Treasurer: **STANLEY A. SIKORA**

Address: **4700 GILBERT AVENUE, SUITE 47, WESTERN SPRINGS, ILLINOIS 60558**

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03 SEP 29 AM 10:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

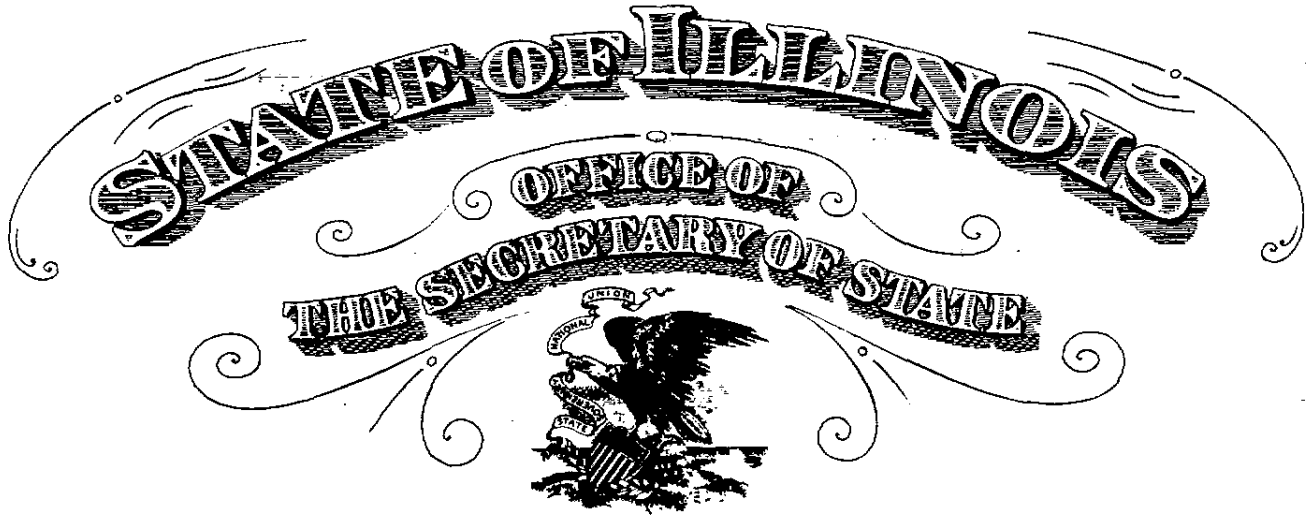
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. _____

(Signature of Director or Officer listed in number 12 of the application)

14. **STANLEY A. SIKORA, PRESIDENT**

(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

CATALYST CONTRACTING, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE JANUARY 23, 1996, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, 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
day of SEPTEMBER A.D. 18TH 2003

Jesse White

SECRETARY OF STATE