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THE PROPERTY

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: THE ENGINEERING STUDIO, 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:
WALTER MAY
(Name of Person)
THE ENGINEERING STUDIO, INC.
(Firm/Company)
2604 DEMPSTER STREET, SUITE 204
PARK RIDGE, IL 60068
(City/State and Zip code)
For further information concerning this matter, please call:
WALTER MAY at (847) 795-8810
(Name of Person) (Area Code & Daytime Telephone Number) STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. (Area Code & Daytime Telephone Number) RAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327
Tallahassee, FL 32399 Tallahassee, FL 32314
Enclosed is a check for the following amount:
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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.

State or country under the la (Date of incorpor						•			
	ation)	(Durat							
-			5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")						
			<u></u> -						
(\$1	(Date first transacted busin EE SECTIONS 607.1501 & 6								
•	PSTER STREET,	•				IL	60068		
200 (001)	(Principal office	e address)			. 11240		``		
(Purpose(s) of corpora Name and <u>street address</u> o	tion authorized in home state f Florida registered agent: ation Service Compar	or country to			of Florida)	105 MA	***************************************		
1001						25	, * * * *** . *		
ffice Address: 1201 H	ays Street				53.24	2	1 4 1		
Tallaha		,1			- 7 <u>0</u>	U	۱۳۹۹ جمعیوروا		
	(City)		(2	Zip code)					
	ptance:								

- 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:

	TORS
hairman: _	ERIC STEIN
ddress:	2604 DEMPSTER STREET, SUITE 204
	PARK RIDGE, IL 60068
ice Chairm	ian: WALTER MAY
ddress:	2604 DEMPSTER STREET, SUITE 204
	PARK RIPGE, IL 60068
rector: _	
ldress: _	
_	
rector: _	
ldress: _	
OFFIC	. •
	WALTER MAY
ldress:	(AS ABOVE)
	nt: ERIC STEIN
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	(AS ABOVE)
ldress:	(AS ABOVE)
ldress: cretary: _	and the second s
	(AS ABOVE) WALTER MAY

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

WALTER MAY, 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



In Testimony Whereof, I Fereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this

day of APRIL

A.D.

2005

Desse White

SECRETARY OF STATE