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| PICK-UP WAIT | r MAIL |
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| (Business Entity | Name) |
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| Certified Copies Certifie | cates of Status |
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| Special Instructions to Filing Officer | - |
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| Office Us | e Only |



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SECNETARY OF STATE TALLAHASSES, ELORIDA

* Burch JAN 27 2000

COVER LETTER

| TO; | New Filing Section Division of Corporations | | | | | |
|----------------|--|--|---------|---|--|--|
| SUBJ | ECT: 1501 Lar | mb Road, Woodstock, IL | 60098 | | | |
| | | Name of corpo | oration | - must include suffix | | |
| Dear S | ir or Madam: | | | | | |
| "Certif | icate of Existence | tion by Foreign Corporative," or "Certificate of Googn corporation to transact | d Star | iding" and check are sub | ct Business in Florida," mitted to register the | |
| Please | return all corres | ondence concerning this | matte | to the following: | | |
| Kathy | Redyk | | | | | |
| | | Na | me of | Person | | |
| API Pr | ocessing | | | | | |
| | | Fin | n/Con | pany | | |
| 3419 | Salt Ocean Drive | , Suite A | | | | |
| | | | Addr | ess | | |
| Ft. Lau | iderdale, FL 333 | 08 | | | | |
| | | City/S | State a | nd Zip code | | |
| kathy@ | gapiprocessing.c | | | | | |
| | | E-mail address: (to be | used t | for future annual report r | notification) | |
| For fur | ther information | concerning this matter, p | lease c | all: | | |
| Kathy F | Redyk | at (95 | 4 |) 567-0013 | | |
| | Name of Perso | | | Code & Daytime Telepho | one Number | |
| | | | | | | |
| | New Filing Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL | porations 3 Center Circle 32301 | | MAILING A New Filing Se Division of Co P.O. Box 6327 Tallahassee, F | ction orporations | |
| Enclose | ed 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 | |

2010 JAN 26 PH 4:

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

| | WITH SECTION 607.1303, FLORIDA EIGN CORPORATION TO TRANSAC | | | | 产当 |
|---------------------|---|-----|------------------|---|------------|
| 1 Merryman Exca | | | | | |
| (Enter name of co | rporation; must include "INCORPORATI rp," "Inc," "Co," or "Corp.") | ED, | " "СОМРА | NY," "CORPORATION," | ASEL PLORI |
| (If name unavailal | ole in Florida, enter alternate corporate na | .me | adopted for | the purpose of transacting business in Fl | orida) |
| 2. Illinois | | 3. | 36-421293 | 30 | |
| (State or country u | nder the law of which it is incorporated) | | | (FEI number, if applicable) | |
| 4. 2-24-1998 | | 5. | Perpetual | | |
| (Date o | of incorporation) | | (Duration: | Year corp. will cease to exist or "perpet | ual") |
| 6. 1501 Lamb Roa | d, Woodstock, IL 60098 | | | | |
| | (Date first transacted busine (SEE SECTIONS 607.1501 & 60 | | | | |
| 7. 1501 Lamb Road | , Woodstock, IL 60098 | | | | |
| | (Principal office | adđ | ress) | | |
| 1501 Lamb Road | d, Woodstock, IL 60098 | _ | | | |
| | (Current mailing | add | lress) | | |
| 8. Certified Genera | | | | | |
| (Purpose(s) | of corporation authorized in home state o | rcc | ountry to be | carried out in state of Florida) | |
| 9. Name and street | address of Florida registered agent: (| P.C | D. Box <u>NO</u> | <u>r</u> acceptable) | |
| Name: | Dawn R. Johnson | | | | |
| Office Address: | 3419 Galt Ocean Drive, Suite A | | | | |
| | Ft. Lauderdale | | , Flor | ida 33308 | |
| | (City) | | <u> </u> | (Zip code) | |
| 10. Registered age | ent'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 duty 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. DIRECTORS | | |
|---|--------------|-----------------|
| Chairman: | 50 | ~ |
| Address: | 三部 | . S |
| | | AN . |
| Vice Chairman: | *11 E | <u> </u> |
| Address: | 101 1131 | <u>⊒</u> 2 (|
| • | 量制 | ယ္ |
| Director: | | |
| Address: | | |
| | | |
| Director | | |
| Director: | | |
| Address: | | |
| | | |
| B. OFFICERS | | |
| President: Patrick Merryman | | |
| Address: 1501 Lamb Road, Woodstock, IL 60098 | | <u> </u> |
| | | |
| Vice President: Brandon Mullar | | |
| Address: 1501 Lamb Road, Woodstock, IL 60098 | | |
| | | |
| Secretary: Tara Hoover | | |
| Address: 1501 Lamb Road, Woodstock, IL 60098 | | |
| Treasurer: | | |
| Address: | - | |
| . / | | |
| NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or di | rectors. | |
| 13. | | |
| (Signature of Director or Officer listed in number 12 of the application) | | . . |
| 14. Patrick Merryman, President (Typed or printed name and capacity of person signing application) | | |
| (Typed of printed name and capacity of person signing apprication) | | |

File Number

5981-744-2



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

MERRYMAN EXCAVATION, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON FEBRUARY 24, 1998, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



Authentication #: 0930600687 Verify at www.cyberdriveillinois.com In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 2ND

day of NOVEMBER

A.D.

SECRETARY OF STATE