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COVER LETTER

TO:	New Filing Section Division of Corporations						
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SUBJ	Name of cor	poration	- must include suffix	<u> </u>			
D (•					
Dear S	ir or Madam:						
"Certif	closed "Application by Foreign Corpora icate of Existence," or "Certificate of G referenced foreign corporation to transa	ood Stan	ding" and check are su				
Please	return all correspondence concerning th	is matter	to the following:				
	Jim C	OMISK	Person				
	1	Vame of I	Pérson				
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	Row Marcachen at (304) 495- 242	7	35.57 A.E.T.	3 JUL -3 AH 10: 12	1
	Name of Person	Area C	Code & Daytime Teleph	ione Number	크림독	Ξ	
					- CST	⇔	
	STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING A New Filing So Division of C P.O. Box 632 Tallahassee, F	ection orporations 7	RIDA	12	
Enclose	ed is a check for the following amount:						
A \$70	.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	S87.50 F Certifica Certified	ate of Stat	us &	



6/26/13

To whom it may concern:

We are sending in our registration to transact business in Florida. Originally, we sent in the wrong form "Reinstatement" with a check for \$750.00.

Please apply this to our \$70.00 filing fee and refund the \$680.00 back to CGN & Associates, Inc. at 415 SW Washington St., Peoria, IL 61602.

Thank you,

Darren Michael

Accounting Manager

PLICATION 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.

(If name unavail	able in Florida, enter alternate corp	orate name adopte	d for the purpose of transacting bus	siness in Florida)
2 11	WOIS under the law of which it is incorpo	3	37-1344041	
(State or country	under the law of which it is incorpo	orated)	(FEI number, if applicable	e)
4. 06	133/95 e of incorporation)	5	Perpetual	
				t or "perpetual")
6. <u>×</u>	2-15-13 (Date first transacted	<u></u>		
	(SEE SECTIONS 607.13	01 & 007.1302, F.	5., to determine penalty hability)	
7	415 SW WASH (Principa	711(570) S	T., PEDEIN, IL ST., LEDLIA, IC	61602
	415 SW WAS	HNGTON mailing address)	ST. IDLIA, I	6/602
8	CONSULTIA s) of corporation authorized in hom	16 SERVI	uz s	
(Purpose(s) of corporation authorized in hom	e state or country t	o be carried out in state of Florida)	
Name and stre	et address of Florida registered	_	_	
Name:	UT CORPORATIO	MEUS AS 1271		300 -
Office Address:	1200 SOUTH PIN PLANTATION, FL (City)	re Island	Run)	
	PLANTATION, FL	33324	Florida 33324	ME -3
	(City)		(Zip code)	
Having been nan	gent's acceptance: ned as registered agent and to a	ccept service of	process for the above stated co	rporation at the place
further agree to c	s application, I hereby accept the comply with the provisions of a familiar with and accept the ob	ll statutes relativ	e to the proper and complete p	
			Kristin Rolds	

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. Nr	s and business addresses of officers and/or directors:
A. DIRE	CTORS
Chairman:	
Address: _	
_	
Vice Chair	man:
Address: _	
_	
Director:	HARSH KOPPULA
Address:	415 SW WASHINGTONST., PEORIA, 1, 61607
-	
Director:	James Comisky
Address: _	James Comisky 415 SW WASHINGTONST, PEORIA, 12 61602
B. OFFI	CERS
President:	SESHADEL GUHA
Address:	415 SW WASHINGTON ST., PEDRIA, L 61602
_	<u> </u>
Vice Presid	dent:
	SSI CONTRACTOR OF THE CONTRACT
	mg 3 O
Secretary:	ANIMESH ARORA
Address:	JAMES COMISKY
Treasurer:	JAMES COMISKY
Address: _	415 SW WASHINGTON ST., PEDRIA, IL 61602
	f necessary, you may attach a control of the application listing additional officers and/or directors.
13	10 A
	Signature of Director or Officer
are true ar	or or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein and that he or she is aware that false information submitted in a document to the Department of State constitutes gree felony as provided for in s.817.155, F.S.
14	SESHHORI GUHA
	(Typed or printed name and capacity of person signing application)

File Number

5839-529-3



To all to whom these Presents Shall Come, Greeting:

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

CGN & ASSOCIATES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JUNE 23, 1995, 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 #: 1317602076

Authenticate at: http://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 25TH

day of JUNE

A.D.

2013

Desse White

SECRETARY OF STATE