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(Rec	questor's Name)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
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Special Instructions to F	Filing Officer:			
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COVER LETTER

	istration Se ision of Co				
SUBJECT	Peryam &	k Kroll Research Cor	poration		
SUBJECT	•	Name o	f corporation	- must include suffix	-
Dear Sir or	Madam:				
"Certificate	of Existence		of Good Stan	Authorization to Transa ding" and check are sub ss in Florida.	
Please retur	n all corres	pondence concerni	ng this matter	to the following:	
Les Prybe					
•			Name of	Person	
Peryam & K	roll Researcl	1 Corporation			
			Firm/Com	pany	
6323 N Avo	ndale				
			Addre	ess	
Chicago, IL	60631				
			City/State a	nd Zip code	
pryrl@pk-re	search.com				
		E-mail address	: (to be used t	for future annual report	notification)
For further	information	concerning this m	atter, please o	eall:	
Les Prybe			773	357-3452	
Na	me of Perso	on	Area Cod	e Daytime Telep	hone Number
Reg Div Clii 266 Tal	istration Se ision of Co ton Buildir 1 Executive lahassee, Fl	rporations ig e Center Circle		MAILING A Registration S Division of Co P.O. Box 632' Tallahassee, F	ection orporations 7
■ \$70.00 F		\$78.75 Filing Certificate of	g Fee &	\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy

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.

Peryam & Kroll	Research Corporation		
(Enter name of c	orporation; must include "INCORPORATED," "orp," "Inc," "Co," or "Corp.")	COMPANY," "CORPORATION	21
(If name unavails	able in Florida, enter alternate corporate name ado	pted for the purpose of transacting	business in Florida)
Illinois	3	36-2532052	
(State or country	y under the law of which it is incorporated)	(FEI number, if app	olicable)
. (Date	of incorporation) 5.	(Date of duration, if other t	han perpetual)
i			
	(Date first transacted business in FI (SEE SECTIONS 607.1501 & 607.1502		у)
6323 N Avondale	Chicago IL 60631		
' <u>.</u>	(Principal	office address)	
	(0)	11 15 1505	<u> </u>
	(Current mailing a	ddress, if different)	ECR ECR
3. Name and stree	et address of Florida registered agent: (P.O. I	Box NOT acceptable)	
Name:	CT Corporation System		
Office Address:	1200 South Pine Island Road	· 	Es =
	Plantation,	33324 , Florida	77 53 78 78 78 78 78 78 78 78 78 78 78 78 78 7
	(City)	(Zip code)	

9. 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.

Jenifer Vincent Jenifer Vincent, Assistant Secretary & Vice President.

(Registered agent's signature)

10. 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.

11. Nan	nes and business addresses of officers and/or directors:			
A. DIR	ECTORS			
Chairman	Beverly Kroll	<u></u>		
Address:	6323 N Avondale			
	Chicago, IL 60631			
Vice Cha	irman:			
Address:		·	<u>.</u>	
Director:	Jeffrey Kroll			
Address:	6323 N Avondale			
71447400	Chicago IL 60631			
Director:	Daniel Kroll			
Address:	6323 N Avondale			
	Chicago, IL 60631			
B. OFF	ICERS			
President	Eric Maddux	₹SE	7	
Address:	6323 N Avondale		득	ji. 1977. 1984
	Chicago IL 60631	20.2	10	era Recogni Politica L
Vice Pres	ident:	POP Ens	A.	
Address:			-	(September 1
		<u>Şm</u>	ယ်	
Secretary:	Daniel Kroll			
Address:	6323 Avondale Chicago IL 60631			
Treasurer	Jeffrey Kroll			
Address:	6323 Avondale Chicago IL 60631			
NOTE:	If necessary, you may attach an addendum to the application listing additional office	rs and/or direct	ors.	
The office are true as third de	Signature of Director or Officer per or director signing this document (and who is listed in number 11 above) affirms a and that he or she is aware that false information submitted in a document to the Department of the Departme			

(Typed or printed name and capacity of person signing application)

File Number

4379-055-2



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

PERYAM & KROLL RESEARCH CORPORATION, A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JANUARY 07, 1964, 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.



In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 20TH

day of

JULY

A.D.2016

Authentication #: 1620202348 verifiable until 07/20/2017 Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE