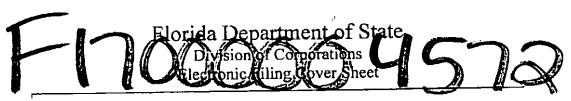
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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000268005 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007

: (702)866-2500

Phone Fax Number

: (702)866-2689

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. *

Email Address:_

FOREIGN PROFIT/NONPROFIT CORPORATION

BAC Restoration, Inc.

17/10 110010101	
Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

HI70002680053

COVER LETTER

Τ	O: Registration Sect Division of Corp					
6	SUBJECT: BAC Restoration, Inc.					
3	OBJECT:	Name of corporation - must include suffix				
D	Dear Sir or Madam:					
"(Certificate of Existence	on by Foreign Corporation on the corporation of the corporation to transact bus	itanding" and check a	ransact Business in Florida," re submitted to register the		
P	Please return all correspondence concerning this matter to the following:					
	_	Nadine Lor	ng			
	Name of Person InCorp Services, Inc.					
			Company	10		
		3773 Howard Hugh				
	Address Łas Vegas, NV 89169-6014					
_	·····					
	City/State and Zip code					
_	documents@incorp.com E-mail address: (to be used for future annual report notification)					
F	or further information (concerning this matter, plea				
Nadine Lo	ong ; on behalf of InCor	p Services, Inc.	(800) 246-26	77 		
_	Name of Person	Area (Code Daytime	Telephone Number		
	STREET/COU Registration Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations Center Circle	Registra Division P.O. Bo	NG ADDRESS: ation Section of Corporations x 6327 ssee, FL 32314		
E	Enclosed is a check for the following amount:					
í	■ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	S78.75 Filing For Certified Copy	ee & S87.50 Filing Fce, Certificate of Status & Certified Copy		
H 170002680053						

BAC Restoration, Inc.

H 1700026800 53

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.

(SEE SECTIONS 607.1501 &	5. Perpetual (Date of duration, if other the iness in Florida, if prior to registration)	
(Date first transacted busi (SEE SECTIONS 607.1501 &	5. Perpetual (Date of duration, if other the iness in Florida, if prior to registration)	
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(SEE SECTIONS 607.1501 &	iness in Florida, if prior to registration)	
(SEE SECTIONS 607.1501 &	iness in Florida, if prior to registration)	
# CL-1- U 00400	bu7.1502, F.5., to testermine penanty matrix)	<i>(</i>)
/d, Elgin, IL 60123		
(1	Principal office address)	
· •		
(Current	t mailing address, if different)	70
	and a norm willing	
	t: (P.O. Box NOT acceptante)	=
orp Services, Inc.		* =
188 67th Court North		<u>.</u>
rahatchee	, Florida	- -
(City)	(Zip cade)	·
	(Curren cess of Florida registered agen corp Services, Inc. 888 67th Court North cahatchee (City) acceptance:	(Current mailing address, if different) ress of Florida registered agent: (P.O. Box NOT acceptable) forp Services, Inc. 888 67th Court North cahatchee, Florida 33470 (City) (Zip code)

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.

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7 1 1000 2 4 1003 3

II. Nan	nes and business addresses of officers a	and/or directors:			
A. DIR	ECTORS				
Chairmar					
Address:	5N484 Deer Pond Dr.				
	St. Charles, IL 60175		<u> </u>		
Vice Cha	irman:	155 . 		<u></u>	
Address:					
Director:	Edward French				
Address:	1443 Wilmette Ave				
	Wilmette, IL 60091				
Director:					
Address:					_ _
B. OF	FICERS				—
Presiden	Michael Clarke		<u> </u>	2	
Address:	1443 Wilmette Ave			-3-	
	Wilmette, IL 60091			``	UPRALE T YES
Vice Pre	sident:	. <u>ş</u> .		<u> </u>	<u>i</u> ————————————————————————————————————
		- ,		17.7	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			(1 s)	ب 	
Secretar	Michael Oakes				
Address	300 N. McLean Blvd. Elgin, IL 601	123			
Treasure	Michael Oakes	· ·			
Address	300 N. McLean Blvd, Elgin, IL 60	123			
NOTE:	If necessary, you may attach an adder	ndum to the application listing additional officer	rs and/or director	'S.	
are true a third o	icer or director signing this document (gnature of Director or Officer (and who is listed in number 11 above) affirms to a document to the Departure. 155, F.S.	hat the facts state artment of State c	ed here constitu	in nes

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

File Number

7117-074-8



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

BAC RESTORATION, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 26, 2017, 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 11TH day of OCTOBER $\Lambda.D.$ 2017 .

Authentication #: 1728401856 verifiable until 10/11/2018 Authenticate at: http://www.cyberdrivelllingis.com Desse White

SECRETARY OF STATE

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