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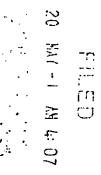
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Certified Copies	_ Certificate	s of Status			
Special Instructions to	Filing Officer				
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Office Use Only



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### **COVER LETTER**

	stration Section sion of Corporations				
SUBJECT:	Interstate Construction Corp				
SODJECT.	Name	of corporation -	nust include suffix		
Dear Sir or M	fadam:				
"Certificate of	"Application by Foreign C of Existence," or "Certificate aced foreign corporation to (	e of Good Standii	ig" and check are submit		
Please return	all correspondence concern	ing this matter to	the following:		
James Sideris					
		Name of Pe	rson		
Interstate Con	struction Corp				
		Firm/Compa	ny		
477 East Butte	erfield Rd. Suite 407				
		Address			
Lombard, IL 6	50148				
		City/State and	Zip code	s · · · · · · · · · · · · · · · · · · ·	
jims@intersta	tebuilds.com			0	
	E-mail addres	s: (to be used for	future annual report noti	fication)	
For further in	nformation concerning this r	natter, please cal	:		
James Sideris		708 at (	310-0615		
Nan	ne of Person	Area Code	Daytime Telephon	e Number	
Regi Divi The 2415	STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassec 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
	i check for the following am heck payable to: FLORIDA E ling Fec	DEPARTMENT Ong Fee &		\$87.50 Filing Fee, Certificate of Status &	

# 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.

INTERSTATE	CONSTRUCTION CORP.		
(Enter name of o	corporation; must include "INCORPORATED Corp," "Inc," "Co," or "Corp.")	O," "COMPANY," "CORPORATIO	",MG
INTERSTATE	CONSTRUCTION CORP. OF ILLINOIS		
(If name unavai	lable in Florida, enter alternate corporate nam	e adopted for the purpose of transact	ing business in Florida)
2. ILLINOIS	_ 3	l	
(State or count	ry under the law of which it is incorporated)	(FEI number, if a	pplicable)
4. 04/14/2017	5	j	
(Date	e of incorporation)	(Date of duration, if other	than perpetual)
6.			
	·	1502, 1 .b., to determine persons state	lity)
7. 477 EAST BUT	TERFIELD RD. SUITE 407, LOMBARD, IL	60148	
	(Principal of	ffice <u>street</u> address)	
	(Current mail	ing address, if different)	20 P
8. Name and stre	eet address of Florida registered agent: (P	.O. Box NOT acceptable)	
Name:	INCORP SERVICES, INC.		
Office Address:	17888 67TH COURT NORTH		<b>₹</b> O
	LOXAHATCHEE.	, Florida 33470	F C
	(City)	(Zip code)	7

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.

Karen Gibson on behalf of InCorp Services, Inc.

(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.

#### A. DIRECTORS **JAMES SIDERIS** □ Chairman Name: Chairman Chairman 477 EAST BUTTERFIELD RD □Vice Chairman Address: ☐ Vice Chairman Address: SUITE 407 □ Director Director LOMBARD, IL 60148 □ President President □ Vice President To Vice President ☐ Treasurer Treasurer □ Secretary **■** Secretary Other Other \_\_\_\_\_ ☐ Other \_\_\_\_\_ □Other \_\_\_\_\_ □ Chairman Namc: \_\_\_\_\_ □Chairman Name: □Vice Chairman Address: □Vice Chairman Address: ☐ Director □ Director ☐ President □President ☐Vice President ☐Vice President ☐ Secretary ☐ Treasurer □ Secretary ☐ Treasurer Other Other Other \_\_\_\_ □Other □ □ Chairman Name: Chairman Name: □Vice Chairman Address: □Vice Chairman Address: ☐ Director □ Director □ President □ President **(** ☐ Vice President ☐Vice President ☐ Treasurer □ Secretary ☐ Treasurer ☐ Secretary ☐ Other \_\_\_\_\_ □Other \_\_\_\_\_ □Other \_\_\_\_\_ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form. PAESIDE T The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. JAMES SIDERIS, PRESIDENT

#### File Number

7124-166-1



## 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

INTERSTATE CONSTRUCTION CORP., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON APRIL 14, 2017, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE, 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 23RD

day of

APRIL

A.D.

2020 .

Authentication #: 2011404968 verifiable until 04/23/2021
Authenticate at: http://www.cyberdriveillinois.com

SECRETARY OF STATE