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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Norjen Corp.			
	on - must include suffix		
Dear Sir or Madam:			
The enclosed "Application by Foreign Corporation for "Certificate of Existence," or "Certificate of Good Stabove referenced foreign corporation to transact businesses."	anding" and check are submitted to register the		
Please return all correspondence concerning this mat	ter to the following:		
Ronald L. Sandack			
Name	of Person		
Gaido & Fintzen			
Firm/Co	ompany		
30 N. LaSalle Street, Suite 2727			
Ad	dress		
Chicago, IL 60602			
City/State	and Zip code		
rsandack@gaido-fintzen.com			
E-mail address: (to be use	d for future annual report notification)		
For further information concerning this matter, pleas	e call:		
Ronald L. Sandack) 346-7855		
Name of Person Area C	ode Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPARTME \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status	NT OF STATE \$78.75 Filing Fee & \$87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy		

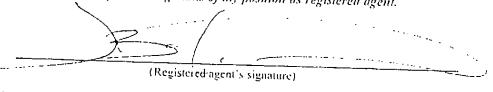
IN COMPLIANCE WITH SECTION 607, 1503. FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Norjen Corp.

(If name unava	lable in Florida, enter alternate corporate name ac	lopted for the purpose of transact	ting business in Florida		
HIIIIOIS	_	27-0726873	3		
(State or coun 08/11/2009	ay under the law of which it is incorporated)	(FEI number, if applicable)			
(Da November 1, 2	c of incorporation) 021	(Date of duration, if other than perpetual)			
	(SEE SECTIONS 607.1501 & 607.1502) Pr., Downers Grove, H. 60515 (Principal office) Pr., Downers Grove, IL 60515		-		
- · · · · · · · · · · · · · · · · · · ·		address, if different)			
Name and <u>stre</u> Name:			20/10EC-2 1		
Name:	(Current mailing a		-2 PH 5		
	(Current mailing a certaddress of Florida registered agent: (P.O. I Marco Escapes, Inc. 599 South Collier Blvd; Suite 115 Marco Island		20/1 DEC -2 PH 5: 29		

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.



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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors (up to six (6) total):

□Director		□Director					
President		□President					
□Vice President		□Vice President					
☐Secretary	Treasurer	Secretary		□Treasurer			
□Other	Other	□Other		□Other			
Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address: 4429 Downers Dr.	□Vice Chairman	Address:				
□Director	Downers Grove, IL 60515	□Director					
□President		□President					
□Vice President		□Vice President					
■ Secretary	□Treasurer	☐ Secretary		□Treasurer			
Other		Other		Other			
☐ Chairman	Name: Norman Sidler	□ Chairman	Name:				
□Vice Chairman	Address: 4429 Downers Dr.	□ Vice Chairman	Address:				
□Director	Danners Grove, IL	Director					
President	100515	□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	☐ Secretary		Treasurer			
Other	Other	Other		Other			
	Use an attachment to report more than six (6). The attact added to the index when filing your Florida Department of Line Signature of Director or	nt of State Annual Re	eport form.				
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.							
Norman Sid	ller, President (Typed or printed name and capacity of perso	V d					
	(Typed or printed name and capacity of perso	n signing application	1)				

File Number

6671-905-7



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

NORJEN CORP., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON AUGUST 11, 2009, 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 7TH day of OCTOBER A.D. 2021 .

Authentication #: 2128002698 verifiable until 10/07/2022

Authenticate at: http://www.ilsos.gov

Desse White

SECRETARY OF STATE