F23000002342

(Re	questor's Name)			
(Ad	dress)			
(Ad	(Address)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
W3300	XXY73	555		

Office Use Only



500403504365

03/09/23--01019--004 *#87.50



March 29, 2023

JOHN SUOMALA 4 WOLF HILL RD. E. SANDWICH, MA 02537

SUBJECT: ENGINEERED HOME SOLUTIONS, INC.

Ref. Number: W23000042555

We have received your document for ENGINEERED HOME SOLUTIONS, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the names and street addresses of the officers and directors of the corporation on the form/application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6053.

Yvette Scott Supervisor

Letter Number: 023A00007259



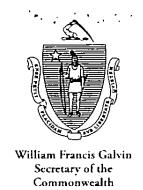
APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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.

1. ENGINETATO HOME SOLUTIONS, INC. (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Corp." "Inc.," "Co.," "Corp.")
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. MASSACHUSETTS (State or country under the law of which it is incorporated) 3. 20 - 4612638 (FEI number, if applicable)
·
4. May 01 2006 5. (Date of incorporation) (Date of duration, if other than perpetual)
6(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. TERNERY LANE SAFETY HAZBOR FL 34695 (Principal office street address)
(Principal office street address) 3779 LANE SHORE DRIVE PAIM HARBOR FL 34684 (Current mailing address, if different)
8. Name and <u>street address</u> of Florida registered agent: (P.O. Box <u>NOT</u> acceptable)
Name: JOHN SUOMALA
Office Address: 3779 LAKE SHORE OR
PALT HARBOR . Florida 94084 (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 dutie 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.

A. DIRECTORS						
□Chairman	Name: JOYN SUOMALA	□Chairman	Name:			
□Vice Chairman	Address: EASY SANDWICH MA	□Vice Chairman				
☐ Director		□Director				
President	JOHN SUOMALA	□President				
•		□Vice President				
☐ Secretary	Treasurer	□Secretary		□Treasurer		
□Other	□Other	□Other	- -	□Other		
	Name: DIANE SUOMALA. Address: 4 WOLF HILL PD EAST SANDWICH MA	□Chairman □Vice Chairman □Director	Address:			
□President	02537	□President				
□Vice President		□Vice President				
Secretary	□Treasurer	☐Secretary		□Treasurer		
Other	(Other	□Other		□Other		
	Name:					
	Address:	□Vice Chairman	Address:			
□ Director		Director				
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	□Secretary		□Treasurer		
□Other	Other	□Other		□Other		
marviodais may be t	ise an attachment to report more than six (6). The attach added to the index when filing your Florida Department Signature of Director or C	of State Annual Rep	ort form.			
The officer or direct	or signing this document (and who is listed in number 1 se information submitted in a document to the Department	Labove) affirms tha	t the facts stated l	herein are true and that he e-		
13						



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

February 21, 2023

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

ENGINEERED HOME SOLUTIONS, INC.

is a domestic corporation organized on May 1, 2006, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which.

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

Villian Tranin Galicin

Processed By: BOD