

	(Requestor's Name)
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PICK-UP	WAIT MAIL
	(Business Entity Name)
l	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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		ration Section on of Corporations			
SUBJE	ΈΤ٠	Saks Technologies Inc			
O DOL		Name o	f corporation	- must include suffix	· · · · · · · · · · · · · · · · · · ·
Dear Sir	r or Ma	ndam:			
"Certific	cate of	'Application by Foreign Cor Existence," or "Certificate of ted foreign corporation to tra	of Good Stan	ding" and check are submit	
Please re	eturn a	Il correspondence concernin	g this matter	to the following:	
Safia N	aila				
			Name of	Person	
Saks Te	echnol	ogies Inc.			
			Firm/Com	pany	
1315 22	2nd Sti	reet, Suite 230			
			Addre	ess	
Oak Bro	ook, IL	60523			
			City/State at	nd Zip code	
safia.na	aila@s	akstek.com			
		E-mail address:	(to be used f	or future annual report notif	fication)
For furtl	her inf	ormation concerning this ma	itter, please c	all:	
Safia N	aila		630 at (631-4600	
-	Name	of Person	Area Code	e Daytime Telephon	e Number
	Regist Divisi The C 2415	ET/COURIER ADDRESS ration Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	: :	MAILING ADD Registration Secti Division of Corpo P.O. Box 6327 Tallahassee, FL.	ion orations
	ake ch	check for the following amore eck payable to: FLORIDA DE ing Fee	PARTMENT Fee & - E		☐ \$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.

		adopted for the purpose of transacting business in Florida
2. IL	3.	46-4932484
(State or country under the law of which it is incorporated)		(FEI number, if applicable)
04/26/2013	5.	
·	of incorporation)	(Date of duration, if other than perpetual)
1315 22nd Stre	et, Suite 230, Oak Brook, IL 60523 (Principal offi	ice street address)
		ng address, it different)
Name:	et address of Florida registered agent: (P.C. Florida Research & Filing Services, Inc. 4044 Longleaf Ct	(m/*t) = 2%
Name:	Florida Research & Filing Services, Inc.	ESTATE STATE
	Florida Research & Filing Services, Inc.	E.F. F.

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.

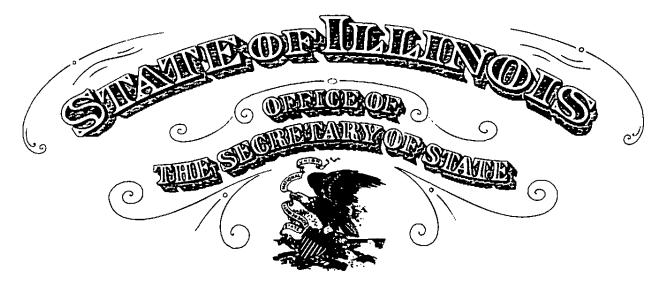
Lyclia E Lett
(Registered agent's signature)

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 Safia Naila □ Chairman □ Chairman Name: 280 Forest Dr ☐ Vice Chairman Address: □ Vice Chairman Address: _____ Addison, IL 60101 Director □Director □President □President □Vice President □Vice President □Treasurer □ Secretary □Treasurer □ Secretary □Other _____ □Other _____ □Other _____ Name: _____ Name: ☐ Chairman □ Chairman □Vice Chairman Address: _____ Address: ☐ Vice Chairman □Director □ Director □President □ President □Vice President ____ □Vice President □ Secretary ☐ Treasurer □ Secretary □ Treasurer ☐ Other _____ ☐(Other ______ □Other ____ □ Chairman □Chairman Name: _____ Name: ______ □Vice Chairman Address: ☐ Vice Chairman Address: □Director □ Director □President □President □Vice President __ ☐ Vice President □Treasurer ☐Treasurer □ Secretary □ Secretary □Other _____ 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. Sec. Handa Signature of Director or Officer 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. Safia Naila

File Number

6904-273-2



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulias, 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

SAKS TECHNOLOGIES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON APRIL 26, 2013, 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 3RD day of OCTOBER A.D. 2023 .

Authentication #: 2327601910 verifiable until 10/03/2024

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

SECRETARY OF STATE