¥99000000650

To:	Qualificat Division o		lien Section ations		-				
SUBJE	ECT:		Robert Sychowski,	Inc.		4-36			
				ation - must includ	e suffix)				
Dear S	ir or Madan	n:							
"Certif		stence", a	by Foreign Corporation and check are submitted						
Please			ence concerning this ma	tter to the following	g: 40 0	-02/03/9	33 —010	26003	
		Walter A		o of Domos		*****87	″.58 *	****87.	50
			(Name	e of Person)					
			(Firm.	/Company)				-	
						IAE	38 38 99		
		LUU E	Irving Park Road, (A	ddress)		—— <u>≥</u>	. ⊆		-
	_		`	,		Ä	EB -3	ا کا شمونون	- *
		KOSETTE	, Illinois 60172 (City	/State/Zip)			} - •.	} ****	- '
Should	you need to	o call som	eone concerning this ma	••		, FLORIDA	AM II: 50		
Wal	ter Asche	er -	at (630) 307-1106					
	(Name of	Person)	(A	rea Code & Daytin	ne Telephoi	ne Number))		
STREE	ET ADDRE	ess:		MAILING A	DDRESS:				
Qualific	cation/Tax I	Lien Secti	on	Qualification/	Fax Lien S	ection			
Division of Corporations 409 E. Gaines St.			Division of Co	-			. /	/	
	ssee, FL 32	2399	-	P.O. Box 6323 Tallahassee, F			d)	12/3/	199
Enclose	ed is a check	for the f	ollowing amount:				ما اسو	, .	
□ \$70.	00 Filing Fe	ee 🗇	\$78.75 Filing Fee & Certificate of Status	578.75 Filing Certified Copy		X \$87.50 F Certifica Certified	ate of Sta	-	

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.

ı.	Name of corn	Robert Sycho			D" "COMP	ANY" "CORPORA"	TION" or		
	words or abbre	viations of like import in or partnership if not so co	language-as	-will-clearly	indicate that	it-is a corporation in	istead of a		
2.					. <u>36–37</u>	792264	121-1		
	(State or countr	y under the law of which	it is incorpo	rated)		(FEI number, if a	ppiicable)		
4.		2 10. 1991	5	5. Perp				matual?	·
	(Da	te of incorporation)		(Dura	mon: Year o	corp. will cease to ex	ast or beil	petuat	,
6.		1, 1999		-				-	
	(Date firs	t transacted business in F	lorida.) (SE	E SECTION	S 607.1501,	607.1502 and 817.15	55, F.S.)		
7.	100 E.	Irving Park Road,	Suite 20)3 .			<u> </u>		
	Roselle	, IL 60172							
			(Current m	ailing addres	is)				
8.	Paintin	g, Remodeling and	Related	Activiti	es				
	(Purpose	(s) of corporation authori	ized in home	state or cou	ntry to be ca	rried out in state of I	Florida)		
9.	Name and st	reet address of Florida	ı registered	l agent: (P	O. Box or	Mail Drop Box <u>NC</u>	<u>ot</u> agege	able	-
	Name:	Robert Sychowski					AHA!	FB.	Π
O:	ffice Address:	8200 120st North					SSEE	ယ့	8
<u> </u>	and a summer of the summer of	Seminole			, Florida	, 33772 (Zip code)	JF STATE FLORIDA	MH: 50	

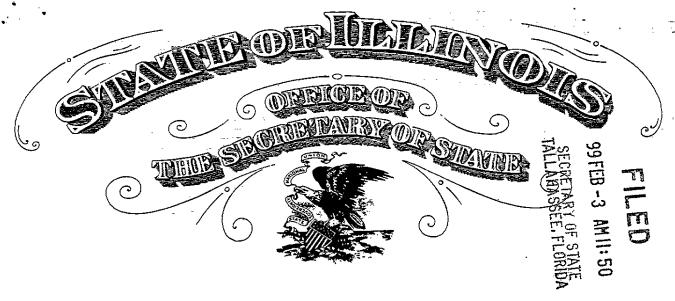
10. Registered agent's acceptance:

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.

(Registered agent's signature)

11. 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.

n n	TORS (Street address only - P.O. Box NOT acceptable)		
rman:	N/A	-	
ress: _			
_			
Chairn	nan:N/A		
ress:			
_	Dohaut Croheralsi		
			<u> </u>
	8200 120st North		
_	Seminole, Florida 33772		
•	<u>.</u> .		
ress:			
OFFIC	ERS (Street address only - P.O. Box NOT acceptable)	Arc s	
ident: _	Robert Sychowski	99 Fi	
ress:	8200 120st North	HASS	
_	Seminole, Florida 33772		
Preside	ent:		· -
ress:		STE O	
etary: _	Robert Sychowski		
ress: _	8200 120st North		
	Seminole, Florida 33772		
surer: _	Robert Sychowski		
ess:	8200 120st North		
-	Seminole, Florida 33772		
re: If	necessary, you may attach an addendum to the application listi	ng additional officers and/or directors.	
	pt MN.	1 10 Cd 1''-	
	(Signature of Chairman, Vice Chairman, or any officer li-	ated in number 12 of the application)	



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do

STATE OF LINE ST

In Testimony Whereof, I, hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this _______ 13TH _____ day of ______ A.D. ______1999 ____.

Desse White

SECRETARY OF STATE