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FOREIGN PROFIT/NONPROFIT CORPORATION
PROAMERICAN HOME IMPROVEMENTS, INC.

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S. ROBERTS

MAY 12 2022

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. PROAMERICAN HOME IMPROVEMENTS, INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

2. IL 3. 453950046
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/18/2010 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6.
(Have first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 8680 Redonda Dr Naples, FL 34114
(Principal office address)
257 NCALDERWOOD ST #328 ALCOA, TN 37701
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Rocket Lawyer Corporate Services LLC
Office Address: 155 Office Plaza Drive, 1st Floor
Tallahassee, Florida 32301
(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 duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature]
(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.

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

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4. DIRECTORS

<input type="checkbox"/> Chairman	Name: <u>CONSTANCE REYES SHAHEEN</u>	<input type="checkbox"/> Chairman	Name: _____
<input type="checkbox"/> Vice Chairman	Address: <u>257 NCALDERWOOD ST #328</u>	<input type="checkbox"/> Vice Chairman	Address: _____
<input type="checkbox"/> Director	<u>Alcoa, TN 37701</u>	<input type="checkbox"/> Director	_____
<input checked="" type="checkbox"/> President	<u>Constance Reyes Shaheen</u>	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other

<input type="checkbox"/> Chairman	Name: _____	<input type="checkbox"/> Chairman	Name: _____
<input type="checkbox"/> Vice Chairman	Address: _____	<input type="checkbox"/> Vice Chairman	Address: _____
<input type="checkbox"/> Director	_____	<input type="checkbox"/> Director	_____
<input type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other

<input type="checkbox"/> Chairman	Name: _____	<input type="checkbox"/> Chairman	Name: _____
<input type="checkbox"/> Vice Chairman	Address: _____	<input type="checkbox"/> Vice Chairman	Address: _____
<input type="checkbox"/> Director	_____	<input type="checkbox"/> Director	_____
<input type="checkbox"/> President	_____	<input type="checkbox"/> President	_____
<input type="checkbox"/> Vice President	_____	<input type="checkbox"/> Vice President	_____
<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer	<input type="checkbox"/> Secretary	<input type="checkbox"/> Treasurer
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other

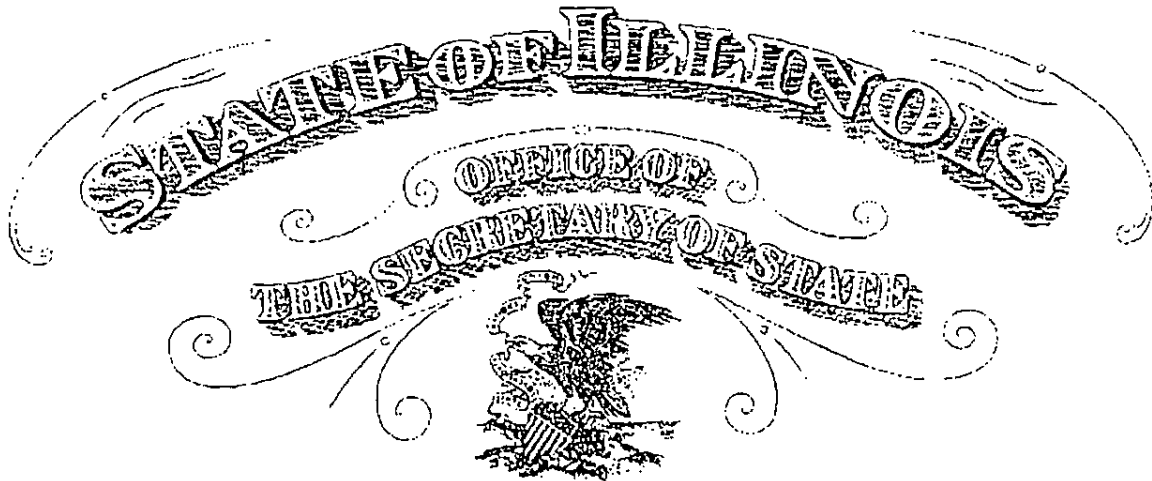
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12. Constance Reyes Shaheen, President
Signature of Director or Officer

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 § 817.135, F.S.

13. CONSTANCE REYES SHAHEEN President
(Typed or printed name and capacity of person signing application)

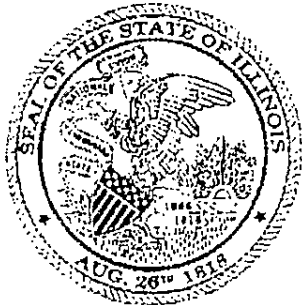
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To all to whom these Presents Shall Come, Greeting:

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

PROAMERICAN HOME IMPROVEMENTS, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON OCTOBER 18, 2010, 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 11TH
day of MARCH A.D. 2022 .

Jesse White

SECRETARY OF STATE