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COVER LETTER

TO:	Registration Section Division of Corporations						
SURI	ECT:	Viewtech Str	uctural Consultants Inc				
3013	ECI.		Name of corporat	ion - m	ust include suffix		
Dear S	Sir or M	adam:					
"Certif	ficate of	Existence," of	by Foreign Corporation for "Certificate of Good S rporation to transact bus	tanding	" and check are sub		
Please	return a	all correspond	ence concerning this ma	iter to 1	he following:		
Victor	r Lissiak	: []]					
		· <u> </u>	Name	of Pers	on		
Viewt	tech Stru	ectural Consulta	nts Inc				
		 .	Firm/C	ompan	y		
4205	Beltway	Drive					
			Ac	ldress			
Addis	on, Texa	as 75001					
			City/Stat	e and Z	lip code		
dl@vi	tinc.net						
		ŀ	-mail address: (to be use	ed for f	uture annual report n	otification)	
For fur	rther in	formation con-	cerning this matter, pleas	se call:			
Diannia Lissiak 972			1) 661-8187 or 214 914-7500 Daytime Telephone Number			
	Name	e of Person	Area C	Code	Daytime Telep	hone 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			
Please	sed is a make ch).00 Fili	eck payable to:	following amount: FLORIDA DEPARTME \$78.75 Filing Fee & Certificate of Status	□ \$7	STATE 8.75 Filing Fee & ertified Copy	S87.50 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.

1. Viewtech Stru	etural Consultants Inc					
(Enter name of c	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	." "COMPANY." "CORPORATE	ON,"			
	•	·				
		•				
(If name unavail	able in Florida, enter alternate corporate name	adopted for the purpose of transac	ting business in Florida)			
2. Texas	3.	92-2346039				
(State or countr	y under the law of which it is incorporated)	(FEI number, if applicable)				
4. 12.16.2022	5.					
(Date	of incorporation)	(Date of duration, if other than perpetual)				
6. None						
	(Date first transacted business)	in Florida, if prior to registration)				
_ 4205 Beltway Dr	(SEE SECTIONS 607.1501 & 607.1 ive, Addison, Texas 75001	.502, r.S., to determine penaity fran	onny)			
7		fice street address)	<u> </u>			
	(Fineiparon	nce <u>street</u> address/				
	(C)	and the control of the control				
	(Current main	ng address, if different)	5			
8. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	COE STATE			
	Business Filings Incorporated	•	. 역 🙃			
Name:	- Trasmess i tings meorporated	- A 10				
Office Address:	1200 South Pine Island Road		(11			
	Plantation	, Florida ³³³²⁴				
	(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.

(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	• • •			
□ Chairman	John Thomas Lissiak, CEO	□Chairman	Name:	
□Vice Chairman	Address:A205 Beltway Drive Addison TX	□Vice Chairman	Address:	
□Director	Addison TX 75001	Director		
President	Victor Lissiak III	□President		
□Vice President		□Vice President		
□Secretary	☐Treasurer	□Secretary		□Treasurer
□Other		□Other		□Other
□ Chairman	Name:	□Chairman		
□ Director		☐ Director		
□ President		□President		
_		□Vice President		
Secretary	☐Treasurer	Secretary		□Treasurer
Other		□Other		□Other
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other	Other	□Other		□Other
Important Notice: individuals may be	Use an attachment to report more than six (6). The at addied to the index when filing your Florida Departs Signature of Directo	ment of State Annual R	eport form.	
The officer or direction is aware that fas.817.155, F.S. Victor Lissi	etor signing this document (and who is listed in num alse information submitted in a document to the Dep	ber 11 above) affirms th	nat the facts state	d herein are true and that he o

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Jane Nelson Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for VIEWTECH STRUCTURAL CONSULTANTS INC (file number 804846419), a Domestic For-Profit Corporation, was filed in this office on December 16, 2022.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 21, 2024.



Jane Nelson Secretary of State

Dial: 7-1-1 for Relay Services Fax: (512) 463-5709 Phone: (512) 463-5555