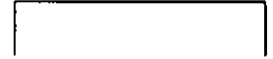




State of Rhode Island
 Department of State - Business Services Division



REINSTATEMENT

STAMP

FOR
 SECRETARY OF STATE
 USE ONLY



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|--|--|---|----------------------|------------------------------|----------------------|---|---|------------------------|---------------------|---|----|--|--|--|--|--|--|--|--|--|--|---|--|--|--|--|--|--|--|--|--|--|--|---|--|--|--|
| 1. Entity ID Number: 001678411 | 2. The name of the entity is: ENGS COMMERCIAL FINANCE CO. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. Date of Revocation: 07-29-2021 | 4. Reason for Revocation: Annual Report | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5. Entity Type: Foreign Business Corporation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6. The reinstatement includes: <table border="0" style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> Annual Reports (# of reports)</td> <td style="text-align: center;">2</td> <td style="text-align: right;">(report filing fee) \$ 50.00</td> <td style="text-align: right;">Total Fees \$ 100.00</td> </tr> <tr> <td><input checked="" type="checkbox"/> Penalty fees (# of years)</td> <td style="text-align: center;">1</td> <td style="text-align: right;">(penalty fee) \$ 50.00</td> <td style="text-align: right;">Total Fees \$ 50.00</td> </tr> <tr> <td><input type="checkbox"/> Replacement filing fee</td> <td style="text-align: center;">\$</td> <td></td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/> LOGS (Tax Good Standing)</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Legislative Act/Court Order</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Change of Agent Form (filing fee) \$</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Change of Registered Office Form - NO FEE</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Certificate of Correction</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Amendment (name change required)</td> <td></td> <td></td> <td></td> </tr> </table> | | <input checked="" type="checkbox"/> Annual Reports (# of reports) | 2 | (report filing fee) \$ 50.00 | Total Fees \$ 100.00 | <input checked="" type="checkbox"/> Penalty fees (# of years) | 1 | (penalty fee) \$ 50.00 | Total Fees \$ 50.00 | <input type="checkbox"/> Replacement filing fee | \$ | | | <input checked="" type="checkbox"/> LOGS (Tax Good Standing) | | | | <input type="checkbox"/> Legislative Act/Court Order | | | | <input type="checkbox"/> Change of Agent Form (filing fee) \$ | | | | <input type="checkbox"/> Change of Registered Office Form - NO FEE | | | | <input type="checkbox"/> Certificate of Correction | | | | <input type="checkbox"/> Amendment (name change required) | | | |
| <input checked="" type="checkbox"/> Annual Reports (# of reports) | 2 | (report filing fee) \$ 50.00 | Total Fees \$ 100.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Penalty fees (# of years) | 1 | (penalty fee) \$ 50.00 | Total Fees \$ 50.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Replacement filing fee | \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> LOGS (Tax Good Standing) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Legislative Act/Court Order | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Change of Agent Form (filing fee) \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Change of Registered Office Form - NO FEE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Certificate of Correction | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Amendment (name change required) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7. The reinstatement is accompanied by: <div style="text-align: right; font-size: 2em; font-family: cursive;">3:38</div> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

FILED

STAMP

APR 18 2022

BY PNH 53PNH



STATE OF RHODE ISLAND
DEPARTMENT OF ADMINISTRATION
DIVISION OF TAXATION
ONE CAPITOL HILL
PROVIDENCE, RI 02908

1678411

RECEIVED
R.I. DEPT. OF STATE
TAX SVCS. DIV.
2022 APR 18 A 8:38

ENGS COMMERCIAL FINANCE CO
ATTN: NANCY VILLAFANA
1 PIERCE PL STE 1100
ITASCA, IL 60143-3149

LETTER OF GOOD STANDING

It appears from our records that **ENGS COMMERCIAL FINANCE CO.** has filed all the required returns due for this letter of good standing and paid all known tax liabilities as of this date. **ENGS COMMERCIAL FINANCE CO.** is in good standing with the Rhode Island Division of Taxation as of **04/13/2022**. This letter of good standing is expressly conditional and may be based upon unaudited returns, subject to future audit.

This Letter of Good Standing does not cover any violation of chapter 20 of Title 44 that has occurred within the last thirty (30) days and any resulting assessments and/or license suspension which have not yet issued from the Division for such violation(s). Any subsequent application for a license or permit may be denied in accordance with R.I. Gen. Laws § 44-20-4.1.

This letter is issued pursuant to the request of the above named corporation for the purpose of:

TAX STATUS

This letter of good standing is valid only for the specific reason listed above and is not valid for any other reason(s).

Very truly yours,

DANNY PACHECO
Supervising Revenue Officer

Neena Savage
Tax Administrator

941062972:18654487
DLN: 10012731622