



STATE OF INDIANA

Request for Proposal 24-78771

Indiana Department of Administration

**On Behalf Of
Family and Social Services Administration**

Solicitation For:

Cost Allocation Services

Due Date and Time: March 29th, 2024 by 3:00 PM ET

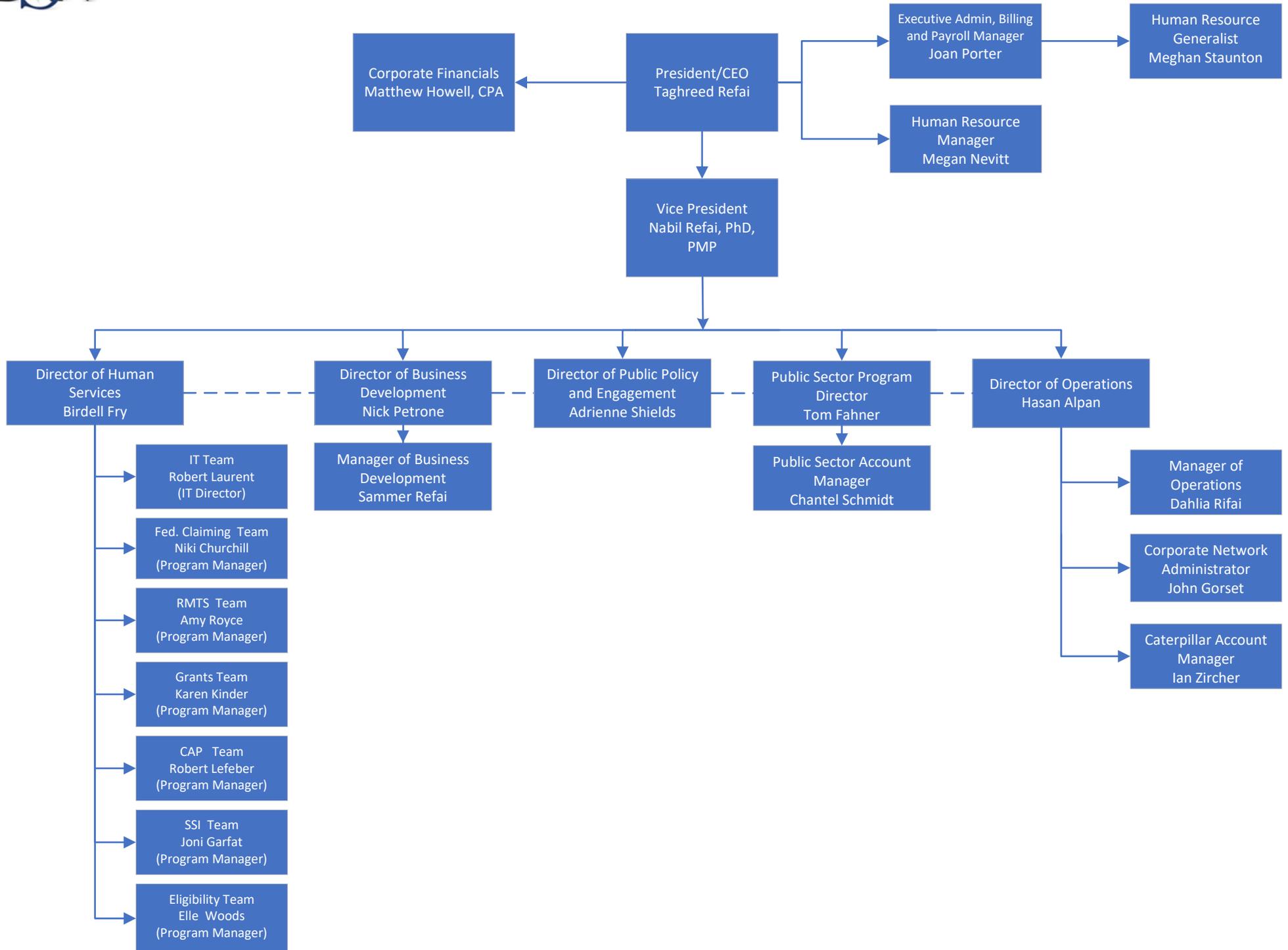
**Appendix: 2.3.2 Respondent's Company
Structure: Certificate of Authority and Organization
Chart**

**Proposal Prepared by:
Diversified Services Network, Inc.**

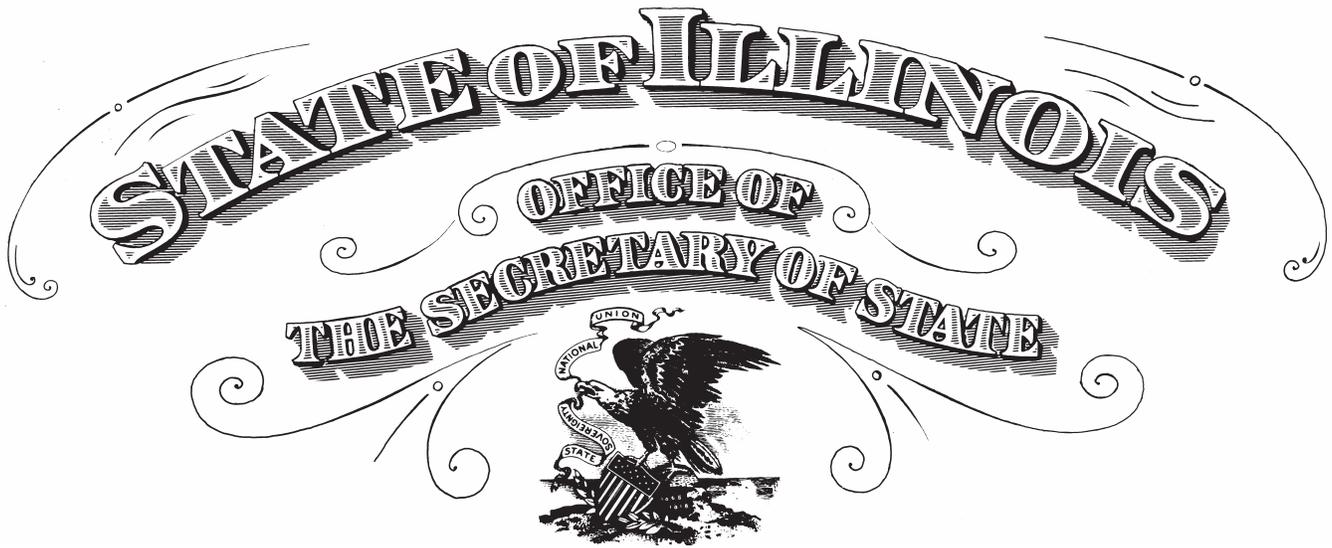




Diversified Services Network, Inc. (DSN) Organizational Chart



**State of Illinois Certificate of Good Standing
Diversified Services Network, Inc (DSN)**



To all to whom these Presents Shall Come, Greeting:

I, Alexi Giannoulis, 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

DIVERSIFIED SERVICES NETWORK INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON JUNE 02, 1989, 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 5TH day of MARCH A.D. 2024 .

Alexi Giannoulis

SECRETARY OF STATE

**State of Indiana Certificate of Authority
Diversified Services Network, Inc (DSN)**

**State of Indiana
Office of the Secretary of State**

Certified Copies

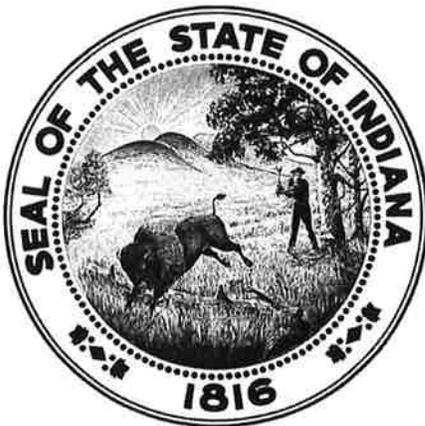
To Whom These Presents Come, Greeting:

I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that this is a true and complete copy of this 5 page document consisting of the following records filed in this office:

Certification Date: March 09, 2024
Business Name: DIVERSIFIED SERVICES NETWORK, INC.
Business ID: 2001042300023

Transaction	Date Filed	No. of pages
Application for Certificate of Authority	04/20/2001	5
Total No. of pages		5



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, March 09, 2024

Diego Morales

DIEGO MORALES
SECRETARY OF STATE

2001042300023 / 16503860

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on April 08, 2024.

**State of Indiana
Office of the Secretary of State**

**CERTIFICATE OF AUTHORITY
of
DIVERSIFIED SERVICES NETWORK, INC.**

I, SUE ANNE GILROY, Secretary of State of Indiana, hereby certify that Application for Certificate of Authority of the above Illinois For-Profit Foreign Corporation has been presented to me at my office, accompanied by the fees prescribed by law and that the documentation presented conforms to law as prescribed by the provisions of the Indiana Business Corporation Law.

NOW, THEREFORE, with this document I certify that said transaction will become effective Friday, April 20, 2001.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, April 20, 2001.

Sue Anne Gilroy

SUE ANNE GILROY,
SECRETARY OF STATE

2001042300023 / 2001042390293



APPLICATION FOR CERTIFICATE OF AUTHORITY OF A FOREIGN CORPORATION

State Form 38784 (R6 / 8-95) Corporate Form 112
Approved By State Board Of Accounts 1995

2001042300023

SILVANO GILROY
SECRETARY OF STATE
CORPORATIONS DIVISION
302 W. Washington St., Rm. E018
Indianapolis, IN 46204
Telephone: (317) 232-6576

INSTRUCTIONS: Use 8 1/2" x 11" white paper for inserts.
Present original and two (2) copies to address in upper right corner of this form.
Please TYPE or PRINT.
Upon completion of filing, the Secretary of State will issue a receipt.

RECEIVED
AND
FILED
IND. SECRETARY OF STATE

Indiana Code 23-1-49-1 et seq
23-1-49-3

FILING FEE: \$90.00

This application cannot be accepted without an original certificate of existence duly authenticated by the proper authority from corporation's domiciliary state within the last sixty (60) days.

This application cannot be accepted unless a registered agent with an Indiana street address is listed in ARTICLE II.

APPLICATION FOR CERTIFICATE OF AUTHORITY
OF

DIVERSIFIED SERVICES NETWORK, INC.
A FOREIGN CORPORATION
TO TRANSACT BUSINESS IN THE STATE OF INDIANA

The undersigned officer of the above ILLINOIS (State of Domicile)
corporation which was formed as:

A general business corporation A professional corporation

desiring to effectuate the admittance of the Corporation to transact business in the State of Indiana, certifies the following facts:

Name of Corporation (Must be identical to name shown in Articles of Incorporation and Amendments thereto)		
<u>DIVERSIFIED SERVICES NETWORK, INC.</u>		
Address of the principal office of corporation (Number and street, city, state and ZIP code)		
<u>354 MEADOW GREEN DR., NAPERVILLE, IL 60565</u>		
Name of the registered agent of the corporation		
<u>CT CORPORATION SYSTEM</u>		
Indiana address of the registered office of corporation (Number and street, city, state and Zip code)		
<u>36 SOUTH PENNSYLVANIA STREET, SUITE 700, INDIANAPOLIS, IN 46204</u>		
Date of incorporation in domiciliary state:		
<u>6/2/1989</u>		
Expected period of duration listed in the Articles of Incorporation		
<u>PERPETUAL</u>		
The names and business addresses of the officers of the Corporation:		
Name	Title	Address (Number, street, city, state and ZIP code)
<u>TAGHREED REFAI</u>	<u>PRESIDENT</u>	<u>354 MEADOW GREEN DR, NAPERVILLE, IL 60565</u>
<u>NABIL REFAI</u>	<u>VICE PRESIDENT</u>	<u>354 MEADOW GREEN DR. NAPERVILLE, IL 60565</u>

THE BOARD OF DIRECTORS

The names and business addresses of the Board of Directors of the Corporation are as follows:

Name	Address (Number, street, city, state and ZIP code)
TAGHREED REFAI	354 MEADOW GREEN DR., NAPERVILLE, IL 60565

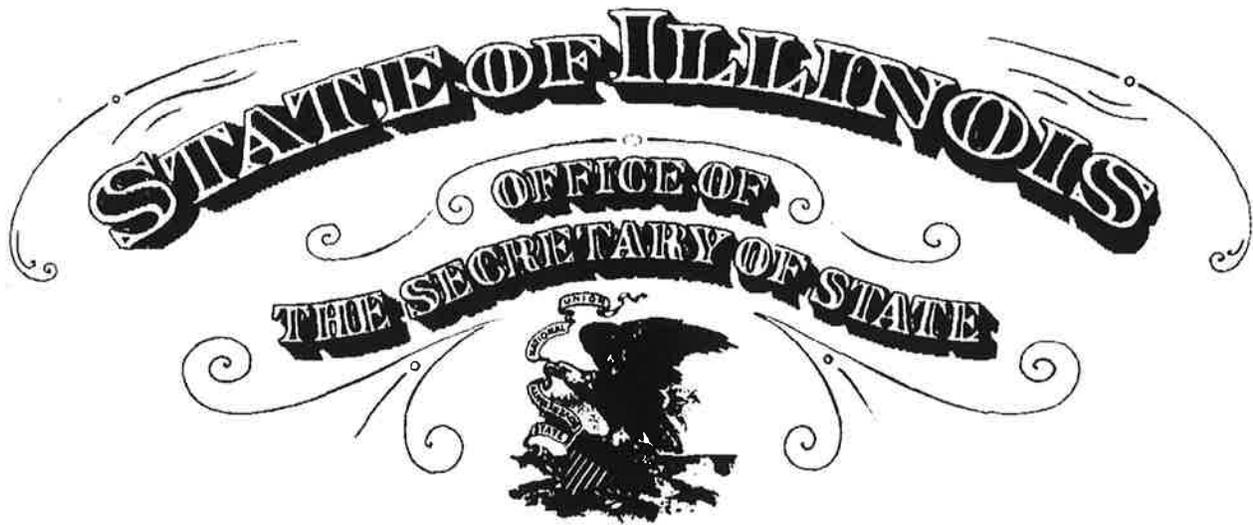
In witness whereof, the undersigned being the PRESIDENT of said Corporation executes this
(title)

Application For Certificate Of Authority, and verifies subject to penalties of perjury, that the facts contained herein are true this

19 day of APRIL, 2001

Signature 

Printed name TAGHREED REFAI



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

DIVERSIFIED SERVICES NETWORK INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE JUNE 2, 1989, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE FILING OF ANNUAL REPORTS AND PAYMENT OF FRANCHISE TAXES, 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 20TH **day of** MARCH **A.D.** 2001.

Jesse White
SECRETARY OF STATE

EXPEDITED
SECRETARY OF STATE

MAR 20 2001

EXP. FEES 10⁰⁰

COPY FEES 5⁰⁰