

F03000002365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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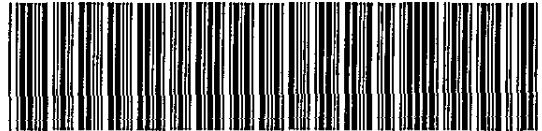
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA  
W03-9168  
J. BRYAN APR - 1 2003

J. BRYAN MAY 13 2003

**TRANSMITTAL LETTER**

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2003 MAY -8 PM 2:38  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** COMMONWEALTH ASSOCIATES, INC.  
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Dennis F. DeCosta, P.E.  
(Name of Person)  
Commonwealth Associates, Inc.  
(Firm/Company)  
2700 West Argyle Street, P.O. Box 1124, Jackson, MI 49204-1124  
(Address)  
Jackson, MI 49204-1124  
(City/State and Zip code)

For further information concerning this matter, please call:

Dennis F. DeCosta at ( 517 ) 788-3051  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

April 1, 2003

DENNIS F. DECOSTA, P.E.  
COMMONWEALTH ASSOCIATES, INC.  
2700 WEST ARGYLE STREET  
JACKSON, MI 49204-1124

SUBJECT: COMMONWEALTH ASSOCIATES, INC.  
Ref. Number: W03000009168

We have received your document for COMMONWEALTH ASSOCIATES, INC. and your check(s) totaling \$148.75. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan  
Document Specialist

Letter Number: 103A00019516

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TALLAHASSEE, FLORIDA

**COMMONWEALTH ASSOCIATES, INC.  
RESOLUTION OF THE BOARD OF DIRECTORS**

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DIVISION OF CORPORATIONS,  
TALLAHASSEE, FLORIDA

I, Stephen W. Arnold, hereby certify that I am the duly authorized Secretary of the organization, charged with keeping the records, and that the following is a true and accurate copy of a resolution adopted at a meeting of the Board of Directors of Commonwealth Associates, Inc. duly held on May 6, 2003, which resolution is now in full force and effect:

The Board of Directors of Commonwealth Associates, Inc., hereby:

**RESOLVED:** to adopt the fictitious name, "Michigan Commonwealth Associates, Inc." for use in conducting business affairs in the State of Florida.

The Resolution is hereby adopted by the Board of Directors of Commonwealth Associates, Inc., on this 6th day of May, 2003, as testified to below.

*Dennis F. DeCosta*  
D. F. DeCosta, President

*David G. Mooberry*  
D. G. Mooberry, Vice President

*Stephen W. Arnold*  
S. W. Arnold, Secretary

*R. M. Collins*  
R. M. Collins, Director

*David A. Shafer*  
D. A. Shafer, Director

*A. A. Vasaris*  
A. A. Vasaris, Director

*S. K. Young*  
S. K. Young, Director

Witness my hand as Secretary, and the seal of this Organization, this date.

*Stephen W. Arnold*  
S. W. Arnold, Secretary

Sworn to before me this 6th day of May, 2003.

*Linda J. Rasmussen*  
Linda J. Rasmussen  
Notary Public, Hillsdale County, Michigan  
Acting in Jackson County, Michigan



LINDA J RASMUSSEN  
Notary Public, Hillsdale County, MI  
My Commission Expires May 29, 2004

**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.

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TALLAHASSEE, FLORIDA  
FILED

1. Commonwealth Associates, Inc.  
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present )

2. Michigan 3. 38-2809676  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. February 24, 1988 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. Upon qualification  
(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification.")  
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 2700 West Argyle Street, P.O. Box 1124, Jackson, MI 49204-1124  
(Principal office address)

P.O. Box 1124, Jackson, MI 49204-1124  
(Current mailing address)

8. Consulting engineering services to the electric utility industry  
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: CT CORPORATION SYSTEM  
E/O CT CORPORATION SYSTEM  
Office Address: 1200 SOUTH PINE ISLAND RD.  
PLANTATION, Florida 33324  
(City) (Zip code)

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.*

Claudia L. Saari Claudia L. Saari  
(Registered agent's signature) Asst. Secretary

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.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

**\*\*PLEASE SEE ATTACHED LISTING\*\***

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

B. OFFICERS

President: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Secretary: \_\_\_\_\_


Address: \_\_\_\_\_

\_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  \_\_\_\_\_

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Dennis F. DeCosta, P.E., President \_\_\_\_\_

(Typed or printed name and capacity of person signing application)

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**COMMONWEALTH ASSOCIATES, INC.**  
**LIST OF OFFICERS AND DIRECTORS**  
**As of June 5, 2002**

Business Address:

Commonwealth Associates, Inc.  
2700 West Argyle Street  
P.O. Box 1124  
Jackson, Michigan 49204-1124  
Telephone: (517) 788-3000

Dennis F. DeCosta, President and Director  
3630 Saunt Road, Jackson, Michigan 49201

David G. Mooberry, Vice President and Director  
311 S. Brown Street, Jackson, Michigan 49203

Stephen W. Arnold, Corporate Secretary and Director  
3301 Whipple, Jackson, Michigan 49201

Conrad C. Olfier, Treasurer  
8949 Mott Drive, Jackson, Michigan 49201

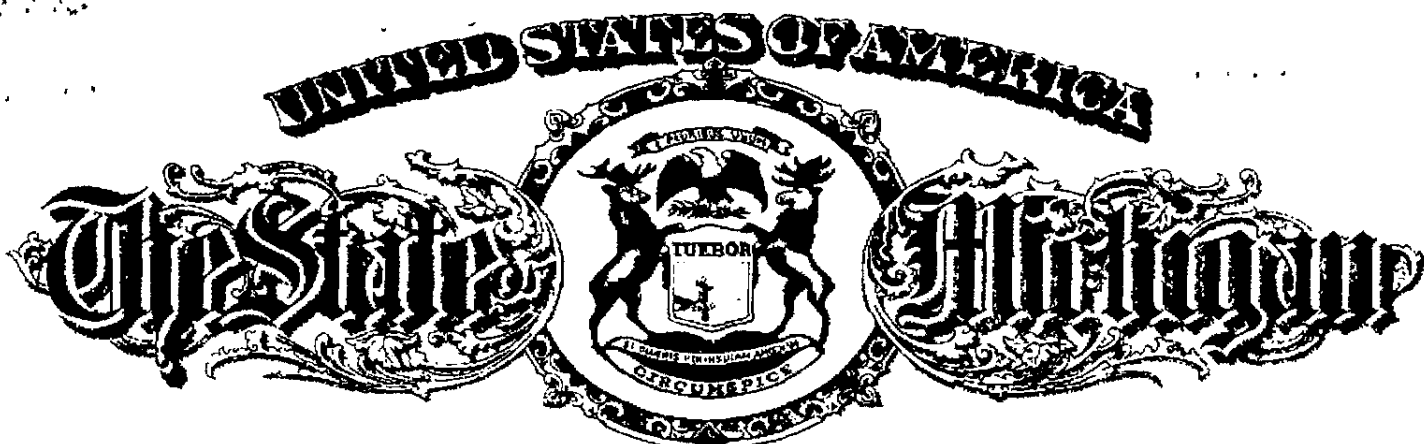
David A. Shafer, Assistant Treasurer and Director  
177 Cottage Drive, Horton, Michigan 49246

Richard N. Collins, Director  
6546 Flamingo Drive, Jackson, Michigan 49201

Allan A. Vasaris, Director  
5135 Vrooman Road, Jackson, Michigan 49201

Stanley K. Young, Director  
1108A Tanbark East, Jackson, Michigan 49203

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TALLAHASSEE, FLORIDA



**Michigan Department of Consumer and Industry Services**

**Lansing, Michigan**

This is to Certify That

**COMMONWEALTH ASSOCIATES, INC.**

was validly incorporated on February 24, 1988, as a Michigan profit corporation, and said corporation is validly in existence under the laws of this state.

This certificate is issued pursuant to the provisions of 1972 PA 284, as amended, to attest to the fact that the corporation is in good standing in Michigan as of this date and is duly authorized to transact business and for no other purpose.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 17th day of March, 2003.

*Andrew S. [Signature]*, Director

Sent by Facsimile Transmission  
712234

Bureau of Commercial Services