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### TRANSMITTAL LETTER

1	O: Regist Divisio	ration Secti on of Corpe	on orations					
S	UBJECT:	<u>a</u> M	P ASSOC	IATES,	INC			
**	(Name or corporation - must include suffix)							
E	Dear Sir or Ma	dam:						
٠4		Existence."	and check are submitte			et Business in Florida," aced foreign corporation to		
P.	Please return all correspondence concerning this matter to the following:							
	MICH	AEL	D. P.	anaro	SR			
-	WD	P F	LSS OCIAT					
·	13.	2 /	(Fir	m/Company)		. —		
			-ANSDOWA	(Address)				
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F,	or firethar into	mmation on	ncerning this matter, pl	aan ooli				
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WICH	AEL D	. PA	VARU SRALI	617 2	:65 3	5724 X 20 / one Number)		
	(Nama	of Person)	(4	Area Code & Da	ytime Telepho	one Number)		
	STREI	ET ADDRI	SSS:	,	MAILING AD	DDRESS:		
	Registration Section Division of Corporations		Registration Section Division of Corporations					
		n of Corpo. Gaines St.	rations		Division of Co P.O. Bux 6327			
		ssee, FL 3	2399		l'allahassee, Fl			
Er	nclosed is a c	eck for the	following amount:					
٥	\$70.00 Filir	g Fee 'C	J \$78.75 Filing Fee & Certificate of Status	C \$79.75 F. Certified	_	© \$87.50 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. (Enter name of convolation, must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc," "Co," or "Corp." in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida, (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607,1501 & 607,1502, F.S., to determine penalty liability) DEVELOPER (Purposers) of responation 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 NOT acceptable) Name: Office Address:

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 greatered agent.

SALVINA AMENTA-GRAY
SPECIAL ASSISTANT SECRETARY

(Registered agent's signature)

il. Attached is a cortificate 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					
Chairman: MICHAEL D. PANARO SR					
Address: 137 LANSDOW NO STREET					
QUINCY MA 02171					
Vice Chairman: MICHAEL D. PANARO TE	- **				
Address: 137 LANS DOWN- STREET					
QUINCY MA 02171					
Director: JUDITH D. PANARD	· · · · · · · · · · · ·				
Address: 137 LANSDOWNE STREET	, <del></del> .				
QUINCY MA 62171					
Director:	- <u>2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - </u>				
Address:	<u>.</u>				
	20 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
B. OFFICERS					
President: MICHAEL D. TANARO SR					
Address: 137 LANS DOWNE STREET					
QUINCY MA 02174	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;				
Vice President: MICHAEC D. PANTRO JR.					
Address: 137 LANSOOW NE STREET	, <del></del>				
Duiney MA 02171	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Secretary: JUDITH D. PANARO					
Address 137 LANSDOWNE STREET QUNCY MA 0217	4				
Trensurer JUDITH P. PANARO	, i				
Address: 137 LANSDOWNE STREET QUINCY MH 0217	2 (				
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.					
(Signature of Director or Officer listed in number 12 of the application)	2.51 may 4				
14. MICHAEL D. PANARO SR., PRESIDENT					
(Typed or printed name and capacity of person signing application)					



# The Commonwealth of Lassachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

William Francis Galvin Secretary of the Commonwealth

December 20, 2004

TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

#### MDP ASSOCIATES, INC.

is a domestic corporation organized on **June 13**, 1991, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.

In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth