# F00000005773

#### TRANSMITTAL LETTER

4.

I KANSIMI I AL LE I I EK	•
TO: Registration Section Division of Corporations	
SUBJECT: Applied Energy Management, 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:	₹ .
Sheron Hryc Kvich (Name of Person)	V (1877
Applied Energy Management, Inc. The Time To The Time T	<u>=</u>
P.o. Box 189	
STOCKbridge, MA 01262 (City/State and Zip code)	115
For further information concerning this matter, please call: 50003423486 -10/12/0001089 *****87.50 *****	-002
Sharon Hryckvich at (413) 298-3400 ext. 22  (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 & ☐ Certificate	· : <del></del>

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. Applied Energy Manage ment I (Name of corporation; must include the word "INCORPORATE words or abbreviations of like import in language as will clearly	D", "COMPANY", "CORPORATION" or
natural person or partnership if not so contained in the name at p	resent.)
2. Massachuserrs 3.	04-3095032
(State or country under the law of which it is incorporated)	(FEI number, if applicable)
4. 10/10/89 5.	Perperval  (Duration: Year corp. will cease to exist or "perpetual")
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")
6. Upon qualification	والمناز والمناز والمستعلق والمراز والمناز والم
(Date first transacted business in Florida. If corporation has not t (SEE SECTIONS 607.1501,	607.1502 and 817.155, F.S.)
7. 14 Pine STREET STOCKBridge, MA	0/262
7. 14 Pine STREET, STOCKBridge, MA (Principal office addre	ess)
P.O. Box 189, STOCKhridge, MA 01262 (Current mailing addre	
(Current mailing addre	ess)
8. <u>Design build lighting retrofit</u> (Purpose(s) of corporation authorized in home state or coun	
9. Name and street address of Florida registered agent: (	P.O. Box or Mail Drop Box NOT asseptable
Name: Allen Cobb	CRE OC -
Office Address: 5313 Cedarshake Lane	
Valrico (City)	, Florida <u>33594</u>
(City)	(Zip code)
10. Registered agent's acceptance:  Having been named as registered agent and to accept service	of process for the shows stated comments.
designated in this application, I hereby accept the appointme further agree to comply with the provisions of all statutes red duties, and I am familiar with and accept the obligations of	ent as registered agent and agree to act in this capacity. I lative to the proper and complete performance of my
Oleu Coll (Registered agent's sign	nature)

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

Chairman	
Address:	
-	
Vice Chai	rman:
_	
Director:	
Address:	
-	
Director:	
Address: _	
-	
B. OFFI	
President:	Stephen Glick
Address: _	P.o. Box 189
	Stockbridge MA 0/262
Vice Presid	ent: SAR NO
Address:	
Secretary: _	
Address:	
reasurer:	The second secon
Address:	
	necessary, you may attach an addendum to the application listing additional officers and/or directors.
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
4. <u>S</u>	Tephen Glick - President  (Typed or printed name and capacity of person signing application)
	(1 yped or printed name and capacity of person signing application)



# The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

October 2, 2000

TO WHOM IT MAY CONCERN:

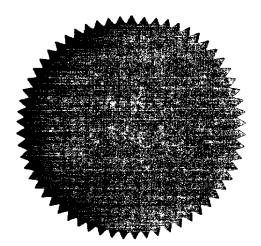
I hereby certify that

## APPLIED ENERGY MANAGEMENT, INC.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on October 10, 1989.

I also certify that so far as appears of record here, said corporation still has legal existence.

OO OCT 12 AM 11: 45
SECRETARY OF STATE
ANI AHASSEE, FLORIDA



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

William Travin Galicin

Secretary of the Commonwealth

\*MGL Chapter 156B Section 83A provides that certain consolidations and mergers may be filed with the division within thirty days after the effective date of the merger or consolidation.