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(City/State/Zip/Phone #)							
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05/06/03--01115--002 **70.00

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations								
SUBJECT: LAFRAMBOISE GROUP LTD.								
	tion - 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:								
MAUREEN BUTLER	25	<u>ಬ</u>						
(Name	of Person)	= = n						
LAFRAMBOISE GROUP LTD.								
(Firm/Company)								
PO BOX 6354	# # # # # # # # # # # # # # # # # # #							
	ddress)							
MASSENA NY 13662								
	te and Zip code)	<u>ധ_</u>						
(Cityroute and Dip code)								
For further information concerning this matter, pleas	e call·							
Tot further information concerning and matter, preas	o carr.							
MAUREEN BUTLER at (613) 022 6664							
) 933-6664 Code & Daytime Telephone Number)							
(1.11111)								
STREET ADDRESS:	MAILING ADDRESS:							
Registration Section	Registration Section							
Division of Corporations	Division of Corporations							
409 E. Gaines St. Tallahassee, FL 32399	P.O. Box 6327 Taliahassee, FL 32314							
Tallalassos, TL 32377	144445555, 12 5251							
Enclosed is a check for the following amount:								
☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & □ \$87.50 Filing Fee, Certified Copy Certified Copy Certified Copy							



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 8, 2003

MAUREEN BUTLER LAFRAMBOISE GROUP LTD P.O. BOX 6354 MASSENA, NY 13662

SUBJECT: LAFRAMBOISE GROUP LTD.

Ref. Number: W03000013297

We have received your document for LAFRAMBOISE GROUP LTD. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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) 245-6913.

Diane Cushing Corporate Specialist

Letter Number: 903A00028635

District of Community D.O. DOY 6997 Well-boson Elevide 9991

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.	LAFRAMBOISE GROUP LTD. 1					
words or abbre	oration; must include the word "INCORPOR eviations of like import in language as will clor partnership if not so contained in the nam	early	indicate that it is a corporation instead	" or of a		_
2. NEW Y	ORK	3.	16-1368792			
	ry under the law of which it is incorporated)		(FEI number, if applica	ble)		
4. MARCH 2	6, 1990	5.	PERPETUAL			
(D:	ate of incorporation)		(Duration: Year corp. will cease to ex	ist or "perpe	tual")	- , , ,
6. UPON Q	UALIFICATION					
	sacted business in Florida. If corporation has (SEE SECTIONS 607.1 TE HWY RTE 56, MASSENA NY 13662	501,	transacted business in Florida, insert "u 607.1502 and 817.155, F.S.)	pon qualific	ation.	")
<u> </u>	(Principal office		ess)	- 13		71
PO BOX 63	854, MASSENA NY 13662		,	138 1384	20	Ē
	(Current mailing	addı	ess)	FLO TE	2 2	
8. MECHANIC	CAL & ELECTRICAL CONTRACTING		_	TATE!	स्म देख	
(Purpos	e(s) of corporation authorized in home state of	or co	untry to be carried out in state of Florid	a)	ധ	_
9. Name and s	treet address of Florida registered age	nt:	(P.O. Box or Mail Drop Box NOT	acceptable)	
Name:	NRAI Services, Inc.		· .			
Office Address:	526 E. Park Avenue					
	Taliahassee		, Florida 32301			
	(City)		(Zîp code)			•
Having been not designated in the further agree to duties, and I and	agent's acceptance: amed as registered agent and to accept so application, I hereby accept the application of all status in familiar with and accept the obligation NRAI Services, Inc. By: (Pasistered agent)	intn tes r ns o	nent as registered agent and agree elative to the proper and complete f my position as registered agent.	to act in th	is cap	acity.
	(Registered agen	LSSL	guarme)			

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 Chairman:	
Address:	
Director:	
Address:	
	03 SB
Director:	CRE LAIN
Address:	1 20 ARY ASSE
B. OFFICERS	TATE ORIDA
President: MICHAEL LAFRAMBOISE	ω
Address: 9820 STATE HWY RTE 56, MASSENA NY 13662	
Vice President:	
Address:	
Secretary: /Treasurer: LUDWIG KUPCZYK	
Address: 1397 ROSEMOUNT AVENUE, CORNWALL, ONTARIO CANADA K6	J 3E5
Treasurer:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing add	ditional officers and/or directors.
13. (Signature of Chairman, Vice Chairman, or any officer listed in	number 12 of the application)
14. LUDWIG KUPCZYK, SECRETARY/TREASURER	aumovi az oz mo apprioanom
(Typed or printed name and capacity of person signing.	application)

State of New York. Department of State

I hereby certify, that the Certificate of Incorporation of LAFRAMBOISE GROUP LTD. was filed on 02/26/1990, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 21st day of April two thousand and three.

SECRETARY OF STATE TALLAMASSEE, FLORIDA

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