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Special Instructions to	Filing Officer:	
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Office Use Only



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TRANSMITTAL LETTER

TO: Registration Sec Division of Cor					
SUBJECT: Schwartz	/Silver Architects	, Inc.			
			ation - must include suffix)	• •
Dear Sir or Madam:					
	", and check are		for Authorization to Trans to register the above refer	act Business in Florida", enced foreign corporation	
Please return all corresp	ondence concerr	ing this mat	tter to the following:		
Elizabeth Cook					
- 1	·	(Name	of Person)		-
Schwartz/Silver Architec	cts, Inc.	. 4.1	. Sala i sala s		
		(Firm/	Company)		- ·
530 Atlantic Avenue		•			et ng 12
		(A	ddress)		
Boston, MA 02210		.6		· · · · · · · · · · · · · · · · · · ·	7á-
		(City/Stat	te and Zip code)		-
For further information	concerning this r	natter, pleas	se call:		
Elizabeth Cook		at (617) 542-6650	·	, s · · · · ·
(Name of Perso	n)		ea Code & Daytime Telep	hone Number)	
STREET ADDRESS: Registration Section Division of Corporation	s		MAILING ADDRE Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 323	ions 8	IS IS

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. Schwartz/Silver Architects, Inc.	en la companya de la	nin errege
(Name of corporation; must include the word "INCORPOI words or abbreviations of like import in language as will c natural person or partnership if not so contained in the name	RATED", "COMPANY", "CORPORATION" or learly indicate that it is a corporation instead of a	· ·
2. Massachusetts	_ 3	
(State or country under the law of which it is incorporated)	3 (FEI number, if applicable)	, -
4. May 1, 1987	5. Perpetual	
(Date of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")	
6. Upon qualification	ering of the state	, est t
(Date first transacted business in Florida. If corporation ha	s not transacted business in Florida, insert "upon qualification.") 1501, 607.1502 and 817.155, F.S.)	WH-
7. 530 Atlantic Avenue, Boston, MA 02210	<u>. </u>	رجي ۾ د
(Principal office	e address)	
Same as above		المنافقة المنافة
(Current mailing	g address)	
To carry on the practice of architecture, interior designates (Purpose(s) of corporation authorized in home state		1.
9. Name and street address of Florida registered age	•	
Name: NRAI Services, Inc.	and the second 	_ : ••
Office Address: 526 E. Park Avenue	<u>and and the second of the sec</u>	÷.
Tallahassee	, Florida 32301	· .
(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.

NRAI Services, Inc.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application application 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. DIRE	ECTORS						
Chairman:	·		*-		<u>, , _</u>		<u> </u>
Address:				<u> </u>	<u> </u>	<u> </u>	<u></u>
-						<u> </u>	
Vice Chai	rman:	<u>-</u> <u>-</u> -	<u> </u>	<u>3</u>	<u> </u>	· .	
Address:		<u> </u>		<u></u> .			<u></u>
, -		<u>.</u>	•		· <u>·</u>	.	<u>. ></u> -
Director:	Robert H. Silver, FAIA	<u> </u>	<u> </u>		a -		*
Address:	530 Atlantic Avenue	<u> </u>	<u></u>		2	· · · · · · · · · · · · · · · · · · ·	<u> </u>
	Boston, MA 02210	·				ر د جونے ر م	<u> </u>
Director:	Warren R. Schwartz, FAIA			-	<u></u>	- 	
Address:	530 Atlantic Avenue				*, <u> </u>	± · · ·	<u> </u>
•	Boston, MA 02210	<u> </u>			<u> </u>		<u> </u>
B. OFF	ICERS						
President:	Robert H. Silver, FAIA	<u> </u>	<u> </u>	<u>, , </u>	<u> </u>	<u> </u>	
Address:	530 Atlantic Avenue	<u> </u>		<u> </u>			<u> </u>
	Boston, MA 02210			·			<u> </u>
Vice Pres	ident: Warren R. Schwartz, FAIA, Principal						
Address:	530 Atlantic Avenue	<u></u>		:	· · ·	, - -	<u> </u>
	Boston, MA 02210				·		<u> </u>
Secretary:	Patricia G, Zoda			<u> </u>	36.	<u> </u>	·
Address:	530 Atlantic Avenue, Boston, MA 02210				- 1 ±		<u> </u>
Treasurer	Patricia G. Zoda	<u></u>	<u> </u>		· · · · .	<u>. 8</u>	<u> </u>
Address:	530 Atlantic Avenue, Boston, MA 02210	<u> </u>		<u> </u>		. Z	SION
NOTE: 13.	anth. Du	£		\$0-40:	grae.	H 93	FILLU STAIT
•	(Signature of Chairman, Vice Chairman, o	r any officer list	ed in num	iber 12 of	me applic	allon)	SHO
14. Rob	pert H. Silver, FAIA President		, ,,			· <u>· · · · · · · · · · · · · · · · · · </u>	

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The Commonwealth of Massachusetts

Secretary of the Commonwealth State House, Boston, Massachusetts 02133

November 7, 2003

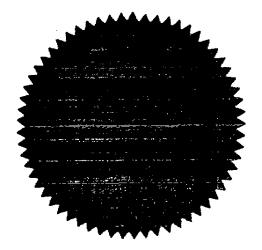
TO WHOM IT MAY CONCERN:

I hereby certify that

SCHWARTZ/SILVER ARCHITECTS, INC.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on May 1, 1987.

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



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

William Travino Galicin

Secretary of the Commonwealth