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(City/State/Zip/Phone #)

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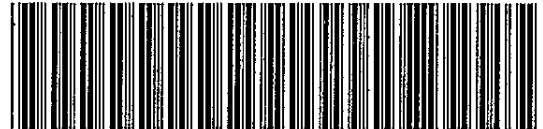
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2004 AUG 17 P 3:43
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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Colonial Contracting, 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:

Thomas G. Christmann

(Name of Person)

Clayton-Johnston, P.A.

(Firm/Company)

P.O. Box 23939

(Address)

Gainesville, FL 32602

(City/State and Zip code)

For further information concerning this matter, please call:

Thomas G. Christmann

(Name of Person)

at (352) 376-4694

(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

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2006 AUG 17 P 3:43
TALLAHASSEE, FL
SECRETARY OF STATE

**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. Colonial Contracting, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Colonial Construction-FL, Inc.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware 3. 76-0731873
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 1997 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. N/A
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 4430 Costello Way, 3rd Floor, Suite B, Haymarket, VA 20169
(Principal office address)
- Same
(Current mailing address)

8. Construction
(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 NOT acceptable)

Name: Srinivas R. Dantuluri

Office Address: 111 S.E. First Ave

Gainesville, Florida 32601
(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.



(Registered agent's signature)

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: Joe Mannino

Address: 17074 Stormy Dr
Haymarket VA 20169

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Joe Mannino

Address: 17074 Stormy Dr
Haymarket Va 20169

Vice President: _____

Address: _____

Secretary: Joe Mannino

Address: 17074 Stormy Dr, Haymarket, VA 20169

Treasurer: Joe Mannino

Address: 17074 Stormy Dr, Haymarket, VA 20169

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

13. J S M
(Signature of Director or Officer listed in number 12 of the application)

14. Joe Mannino
(Typed or printed name and capacity of person signing application)

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SECRETARY OF AGRICULTURE
TALLAHASSEE FL 32304

Delaware

PAGE 1

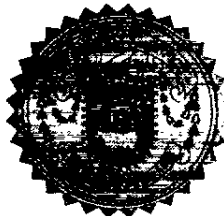
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COLONIAL CONTRACTING, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWELFTH DAY OF AUGUST, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CORPORATION IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE NOT HAVING BEEN CANCELLED OR DISSOLVED SO FAR AS THE RECORDS OF THIS OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COLONIAL CONTRACTING, INC." WAS INCORPORATED ON THE TWENTY-THIRD DAY OF JUNE, A.D. 1997.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

2764440 8300

AUTHENTICATION: 3292389

040591714

DATE: 08-12-04