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To:

Division of Corporations

Fax Number : (850)205-0381

From:

Account Name

: CHECKMATE

Account Number : I20030000146

Phone Fax Number

: (941)922-2801 : (941)922-7741

FOREIGN PROFIT/NONPROFIT CORPORATION

J.L.B. CONSTRUCTION COMPANY INC.

Certificate of Status	0
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Corporate Filing Menu

T. Euron OCT Addis.

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9/29/2006

COVER LETTER

	ring Section sion of Corporations
SUBJECT:	J.L.B. CONSTRUCTION COMPANY INC.
	(Name of corporation - must include suffix)
Dear Sir or M	Madam:
"Certificato o	d "Application by Foreign Corporation for Authorization to Transact Business in Florida," of Existence," and check are submitted to register the above referenced foreign corporation to ness in Florida.
Please return	all correspondence concerning this matter to the following:
LEAH H	ARN
,	(Name of Person)
CHECK	
	(Firm/Company)
4411 BE	E RIDGE ROAD, #257
	(Address)
SARASC	OTA, FL 34233
	(City/State and Zip code)
For further in	ARN at (941) 922-2801
(Na	mc of Person) (Area Code & Daytime Telephone Number)
New Divis Clift 2661	TEET/COURIER ADDRESS: Filing Section Sion of Corporations United Building Executive Conter Circle Phasses, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a	a check for the following amount:
₹]\$70 .00 Fil	ling Fee \$\bigcup \\$78.75 \text{Filing Fee & }\bigcup \\$87.50 \text{Filing Fee & }\bigcup \\$Certificate of Status & \bigcup \\$Certified Copy \text{Certified Copy}

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOILOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	NSTRUCTION COMPANY INC.
(Enter name of co	orporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Co	orp," "Inc," "Co," or "Corp.")
5000	COPET CONCEDURATION TON
JOME	ERSET CONSTRUCTION, INC. able in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
•	· · · · · · · · · · · · · · · · · · ·
2 MASSACH	
•	under the law of which it is incorporated) (FEI number, if applicable)
4. MARCH 1	
•	of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. UPON QU	JALIFICATION
-	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
, 4 FIRST S	TREET BRIDGEWATER, MA 02324
* 1	(Principal office address)
SAME AS	ABOVE
	(Current mailing address)
ANIV 9 AI	· · · · · · · · · · · · · · · · · · ·
	L LAWFUL BUSINESS of corporation authorized in home state or country to be carried out in state of Florida)
(Enthoce)	of or compositions against seed in monte some or commity to be carried out in state of Frontial
9. Name and street	et address of Florida registered agent: (P.O. Box NOT acceptable)
Name:	CHECK MATE LICENSING SERVICE
	4411 BEE RIDGE ROAD, #257
Office Address:	
	SARASOTA , Florida 34233 (Zip code)
	(City) (Zip code)
10. Registered as	gent's acceptance:
Having been nam	ed as registered agent and to accept service of process for the above stated corporation at the place
designated in this further awar to o	application, I kareby accept the appointment as registered agent and agree to act in this capacity. I comply with the provisions of all statutes relative to the proper and complete performance of my duties
and I am familiar	origity wast one provisions by an sammes remaine so the proper and complete performance by my duties; with and accept the obligations of my position as registered agent.
-	A AUI
G	the filling
*	(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.

 Names and business addresses of officers and/or director 	12.	Names a	and business	addresses o	of officers	and/or o	firectors
--	-----	---------	--------------	-------------	-------------	----------	-----------

hairman:	-	-			50		_
Address:					ES	<u> </u>	
						<u> </u>	_ ~
lice Chairman:						t G2	Ē
Address:			·		FG		7
	72		<u> </u>		103	2	- \-
Time to an	· –			 -		U	
Director:		· · · · · · · · · · · · · · · · · · ·	. .				-
Address:							-
	55.				· · · · · · ·		- .
Director:							- ,
Address:	<u> </u>						**-
		,		•		. . 	· ——
B. OFFICERS				-			-
President: JEFFREY BETIT							
Address: 25 MAURA DRIVE						 :	-
BRIDGEWATER, MA 02324					-		
			- 				-
/ice President:							-
\ddiress:		= :					-
							_
locretary;		· · · · · · · · · · · · · · · · · · ·			· 	- : 	_
Address:		· · ·			· ·		
Treasurer:							
Address:		,					
			<u></u>				
NOTE: If necessary, you may attach an addendum to the ap	plication listing a	dditional offi	cers and/or	r direct	ors.		
3. CHIMATA							
(Signature of Director or Officer lister	l in number 12 of	the application	ж)	-	 .		•
4. JEFFREY BETIT, PRESIDENT (Typed or printed name and capacity							



The Commonwealth of Massachusetts Secretary of the Commonwealth

State House, Boston, Massachusette 02133

September 27, 2006

TO WHOM IT MAY CONCERN:

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

J.L.B. CONSTRUCTION COMPANY INC.

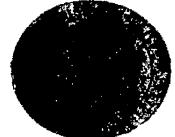
is a domestic corporation organized on March 11, 2002, under the General Laws of the Commonwealth of Massachusens.

I further tentily that there are no proceedings presently pending under the Manachusotts General Laws Chapter 186D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, taid 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

William Francis Gelicin



Processed By: jb

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