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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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MAIL

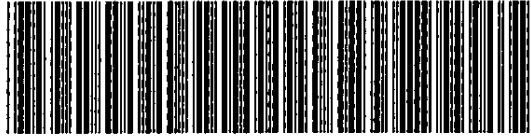
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/24/14

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Alpha Chemical Services 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," or "Certificate of Good Standing" 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:

Elise Dauksevicz

Name of Person

Alpha Chemical Services Inc.

Firm/Company

46 Morton St., P.O. Box 431

Address

Stoughton, MA 02072

City/State and Zip code

elised@alphachemical.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laura Cosgrove

Name of Person

at (781) 344-8688 x125

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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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

**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. **Alpha Chemical Services Inc.**

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

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

2. **Massachusetts**

(State or country under the law of which it is incorporated)

3. **04-2451781**

(FEI number, if applicable)

4. **5/30/1969**

(Date of incorporation)

5. **Perpetual**

(Duration: Year corp. will cease to exist or "perpetual")

6. **12/01/2014**

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

7. **46 Morton Street, Stoughton, MA 02072**

(Principal office address)

P.O. Box 431, Stoughton, MA 02072

(Current mailing address)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: **Steven L. Hynds**

Office Address: **2272 Malachite Drive**

Lakeland, Florida **33810**

(City)

(Zip code)

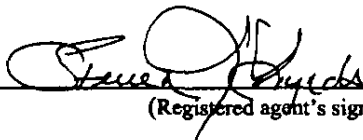
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9. Registered agent's acceptance:

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)

10. 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.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Mark Juckett

Address: 23 LAURA LANE BUZZARDS BAY, MA 02532

Vice Chairman: _____

Address: _____

Director: BRUCE JACOBSON

Address: 166 EAST STREET FOXBORO, MA 02035

Director: KRISTINE TERRIO

Address: 300 BEDFORD ST, APT. 506, MANCHESTER, NH 03101

B. OFFICERS

President: Elise Dauksevicz

Address: 786 E WASHINGTON STREET HANSON, MA 02072

Vice President: _____

Address: _____

Secretary: PETER JACOBSON

Address: 75 ROCKY HILL ROAD REHOBOTH, MA 02769

Treasurer: BRIAN JACOBSON

Address: 81 WINTERGREEN FARM ROAD, PEMBROKE, MA 02359

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

12. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Elise Dauksevicz, President

(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Date: December 16, 2014

To Whom It May Concern :

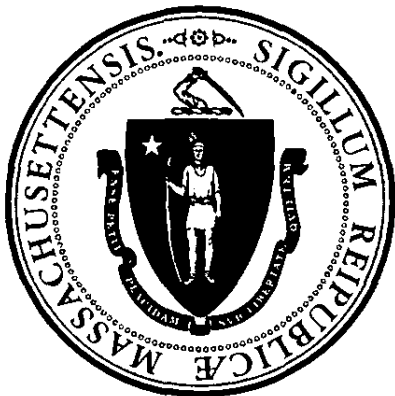
I hereby certify that,

ALPHA CHEMICAL SERVICES, INC.

appears by the records of this office to have been incorporated under the General Laws of this

Commonwealth on **May 30, 1969.**

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.

Secretary of the Commonwealth

Certificate Number: 14120891640

Verify this Certificate at: <http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx>

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