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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

: NORTHWEST REGISTERED AGENT LLC Account Name

Account Number : I20090000081

Phone

: (509)768-2249

Fax Number

: (855)330-1010

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FOREIGN PROFIT/NONPROFIT CORPORATION

Geostruction, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

MAY 8 2015

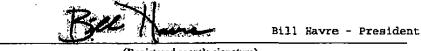
S. GILBERT

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.

	rporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	D,"	"COMPANY," "CORPORATIO)N,*	 , ·	<u></u>
(If name unavaila	ble in Florida, enter alternate corporate na	me a	dopted for the purpose of transact	ing busines	s in Flo	orida)
Massachusetts 3. n/a						
(State or country under the law of which it is incorporated) (FEI number, if						
03/02/200	Perpetual					
	(Date of incorporation) (Duration: Year corp. will ce					ual")
Upon Qu	alification		•			
3030 N. R	(Date first transacted busine: (SEE SECTIONS 607.1501 & 60 ocky Point Dr. STE 150.	7.15		ility) Se Cer	15 #	بالوويات
•	(Principal office	·		-	=₹-	
PO Box 54	(A) (C)	<u>.</u>	-			
	(Current mailing	addre	ess)		P	177
General ((1) (1) (1) (2) (3)	 တ သ				
(Purpose(s	of corporation authorized in home state o	r cou	ntry to be carried out in state of F	lorida)	9	
. Name and stree	t address of Florida registered agent: (P.O	. Box NOT acceptable)			
Name:	REGISTERED AGENTS	IN	<u>C.</u>			
Office Address:	3030 N. Rocky Point Dr, STE	15	<u>0A</u>			
	Tampa		, Florida 33607			
	(City)		(Zip code)			
Having been nam designated in this	gent's acceptance: ed as registered agent and to accept s application, I hereby accept the appo omply with the provisions of all statut	intm	ent as registered agent and a	gree to act	t in thi	s сара

· 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: Address: Vice Chairman: __ Address: _ Director: George Pantazopoulos Address: PO Box 540, Walpole, MA 02081 Director: **B. OFFICERS** President: George Pantazopoulos Address: PO Box 540, Walpole, MA 02081 Vice President: Secretary: George Pantazopoulos Address: PO Box 540, Walpole, MA 02081 Treasurer: George Pantazopoulos Address: PO Box 540, Walpole, MA 02081 NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 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. 14. George Pantazopoulos, President



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

Date: May 04, 2015

To Whom It May Concern:

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

is a domestic corporation organized on March 02, 2004 , under the General Laws of the Commonwealth of Massachusetts. I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said 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

Ellian Francis Gallein

Certificate Number: 15053025450

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

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