F17000004037

(Requestor's N	ame)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WA	IT MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies Certi	ficates of Status				
Special Instructions to Filing Officer:					
_					

Office Use Only



500303308365

09/06/17--01021--006 **78.75

SECHETARY OF STATE

17 SEP -6 PH 2:1

COVER LETTER

TO:	_	tration Se on of Cor	ction porations					
e1:01			Roofing, Inc.					
SUBJECT: Name of corporation - must include suffix								
Dear S	ir or M	adam:						
"Certif	icate of	Existenc		of Good Sta	anding" a	nd check are sul	nct Business in Florida," bmitted to register the	
Please	return :	all corresp	ondence concern	ing this matt	er to the f	ollowing:		
Caesar	J. Balze	otti, Jr.						
			· ·	Name o	f Person			
Caesar	's Rootii	ng. Inc.						
				Firm/Co	mpany			
36 Ale:	xandra I	Road						
			· · · · · · · · · · · · · · · · · · ·	Add	ress			
Lynnfi	eld, MA	01940						
				City/State	and Zip c	ode		
Office(@caesar	sroofing.co						
			E-mail addres:	s: (to be used	for futur	e annual report	notification)	
For fur	ther inf	ormation	concerning this n	natter, please	call:			
Caesar J. Balzotti, Jr. 781		-		860-0800 x102				
Name of Person		at (/ de	Daytime Telephone Number				
	Regist Divisi Clifto 2661	tration Secon of Cor on of Cor n Building	porations g Center Circle	S:		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	
Enclos	ed is a o	check for	the following amo	ount:				
□ \$70	,00 Fili	ing Fee	S78.75 Filin Certificate of			Filing Fee & ed Copy	S87.50 Filing Fee. Certificate of Status &	

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.

	orporation; must include "INCORPORATED orp," "Inc," "Co," or "Corp.")	" "COMPANY," "CORPO	RATION."		
men, con c	orp. The, Co. of Corp.)				
(If name unavaila	able in Florida, enter alternate corporate name	adopted for the purpose of to	ransacting business in Florida)		
Massachuetts	nchuetts 04-2695160				
. (State or countr	y under the law of which it is incorporated)	(FEI num	ber, if applicable)		
03/19/1980	•		• •		
·	of incorporation) 5	(Date of duration, if other than perpetual)			
(1)ate	of incorporation)	(Date of duration.	, ii omer man perpetuar)		
			<u>.</u>		
	(Date first transacted business (SEE SECTIONS 607.1501 & 607.1				
1101 Brickell Av	enue, 8th Floor, South Tower, Miami, FL 331	·	ny naomiy)		
		pal office address)			
	(1-rtilic	pai office address)	- √ -		
			F <u>\$</u>		
	(Current mail	ing address, if different)	- 一		
			SSE SAWA		
. Name and stree	et address of Florida registered agent: (P.	O. Box <u>NOT</u> acceptable)			
Name:	Caesar J. Balzotti, Jr.		주를 글 그		
	1101 Brickell Avenue, 8th Floor, South To	ower	2: 4 TATE ORID		
Office Address:			9 to		
	Miami	33131 Florida			
	(City)	(Zip code			

9. Registered agent's acceptance:

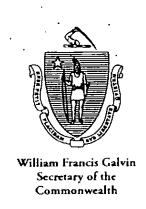
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative 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 Caesar J. Balzotti, Jr. Chairman: 36 Alexandra Road Address: Lynnfield, MA 01940 Vice Chairman: Address: ____ Director: __ Address: Director: _ Address: **B. OFFICERS** Caesar J. Balzotti, Jr. President: 36 Alexandra Road Address: Lynnfield, MA 01940 Vice President: Address: _ Caesar J. Balzotti, Jr. Secretary: 36 Alexandra Road, Lynnfield, MA 01940 Address: Caesar J. Balzotti, Jr. Treasurer: 36 Alexandra Road, Lynnfield, MA 01940 Address: NOTE: If precessary, you may anathan 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 11 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. Caesar J. Balzotti, Jr., President

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



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

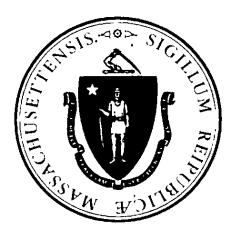
Date: August 15, 2017

To Whom It May Concern:

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

CAESAR'S ROOFING, INC.

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

William Travino Galecin

Certificate Number: 17080271220

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

Processed by: