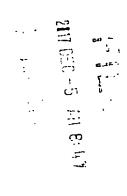
F17000005468

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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State of the state

DECO 6 MIT RIS

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 940453 4320891

AUTHORIZATION : Synell Blome

COST LIMIT : '\$ 7.0<00

ORDER DATE: December 4, 2017

ORDER TIME : 11:08 AM

ORDER NO. : 940453-010

CUSTOMER NO: 4320891

FOREIGN FILINGS

NAME: ATMOSPHERIC AND ENVIRONMENTAL

RESEARCH, INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

TO:	Registration Section Division of Corporations										
	ATMOSPHERIC AND ENVIRONMENTAL RESEARCH, INC.										
SUBJ	ECT: _		Name o	of corporat	ion - mu	st include suffix					
_				,, co.pc. a.							
Dear S	ir or Mad	am:									
"Certi:	ficate of E	xistence,"		of Good S	tanding	" and check are sub	et Business in Florida," mitted to register the				
Please	return all	correspon	dence concerni	ng this ma	tter to th	ne following:					
		•		-	MANTE						
				Name	of Perso	on					
			INS	URANCE	SERVIC	ES OFFICE, INC.					
				Firm/C	ompany						
			545 W.A	SHINGTO	N BOUL	EVARD-LAW DEP	Γ.				
				Ac	ldress						
				JERSEY	CITY, N	J 07310					
				City/Stat	e and Z	p code					
				AMANTE	Y@ISO	.СОМ					
	· <u>-</u>		E-mail address	: (to be use	ed for fu	ture annual report i	notification)				
For fu	rther info	mation co	ncerning this m	atter, plea	se call:						
MS. A. MANTEY				201		469-2000					
	Name o	of Person		Area (ode	Daytime Telep	hone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				S:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314						
Enclos	sed is a ch	eck for the	following amo	ount:							
\$ \$7	0.00 Filin	g Fee 🛭	3 \$78.75 Filin Certificate (8.75 Filing Fee & rtified 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.

		orp," "Inc," "Co," or "Corp.")	e name adoi	oted for the purpose of transacting busines	s in Florida)	-		
2.				(FEI number, if applicable)		_		
4.	FEBR (Date	UARY 10, 1977 of incorporation)	5	(Date of duration, if other than perpetual)		-		
7.	(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 131 HARTWELL AVENUE LEXINGTON, MA 02421 (Principal office address) 545 WASHINGTON BLVD-21ST FLR JERSEY CITY, NJ 07310							
	(Current mailing address, if different)							
8.	Name and stree	et address of Florida registered age CORPORATION SERVICE COM	-	ox <u>NOT</u> acceptable)		Ed 8: 67		
О	ffice Address:	1201 HAYS STREET		_				
		TALLAHASSEE		32301 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.

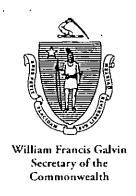
Roxanne Turner
Asst. Vice President

(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: Vice Chairman: KENNETH E. THOMPSON 545 WASHINGTON BLVD JERSEY CITY, NJ 07310 Address: _ Director: **B. OFFICERS GUY SEELEY** President: 131 HARTWELL AVENUE LEXINGTON, MA 02421 Vice President: MARK ANQUILLARE 545 WASHINGTON BLVD JERSEY CITY, NJ 07310 Address: _ KENNETH E. THOMPSON Secretary: 545 WASHINGTON BLVD JERSEY CITY, NJ 07310 Address: ____ **EVA HUSTON** Treasurer: _ 545 WASHINGTON BLVD JERSEY CITY, NJ 07310 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 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. KENNETH E. THOMPSON, SECRETARY

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



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

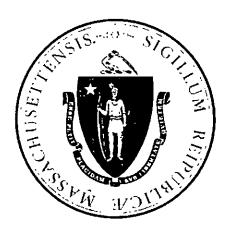
Date: December 04, 2017

To Whom It May Concern:

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

ATMOSPHERIC AND ENVIRONMENTAL RESEARCH, 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 Travers Galein

Certificate Number: 17120063970

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

Processed by: