## E190000190

(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE
TALLAHASSEF FLORID

Office Use Only

## **COVER LETTER**

TO: Registration Section Division of Corporati	ons			
Drago General C	Contracting Corp.			
SUBJECT:	Name of corporation	- must include suffix		
D 0: W 1	·			
Dear Sir or Madam:				
The enclosed "Application by "Certificate of Existence," or above referenced foreign corp	"Certificate of Good Stan	ding" and check are sub	et Business in Florida," omitted to register the	
Please return all corresponder Steven Drago	nce concerning this matter	to the following:		
-	Name of	Person		
Drago General Contracting				
<del></del>	Firm/Com	pany		
15 Wolf Rd		, .		
	Addre			
Bourne, MA 02532	,			
sdrago@newenglandsoundprox	City/State a	nd Zip code		
E-	mail address: (to be used t	or future annual report	notification)	
For further information conce	erning this matter, please o	all:		
Steven Drago	781	710-1261	710-1261	
		_)		
Name of Person	Area Cod	e Daytime Telep	shone Number	
STREET/COURIER ADDRESS:		MAILING ADDRESS:		
Registration Section		Registration Section Division of Corporations		
Division of Corporate Clifton Building	OUS		P.O. Box 6327	
2661 Executive Cent Tallahassee, FL 323		Tallahassee, FL 32314		
Enclosed is a check for the fe	llowing amount:			
□ \$70.00 Filing Fee □ :	\$78.75 Filing Fee & Gertificate 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. Drago General Contracting Corporation 1. (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) 04-3401475 Massachusettes (FEI number, if applicable) (State or country under the law of which it is incorporated) (Date of duration, if other than perpetual) (Date of incorporation) (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 15 Wolf rd. Bourne, MA 02532 (Principal office address) (Current mailing address, if different) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Sonic-Shield Name: 7921 Congress St Office Address: Port Richev 34668 , 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.

(Degistered 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 Robin Drago Chairman: 15 Wolf Rd. Bourne MA 02532 Address: \_\_\_\_ Joseph Drago Vice Chairman: 15 Wolf Rd, Bourne MA 02532 Address: Address: \_\_\_\_ Director: \_ Address: \_\_ **B. OFFICERS** Robin Drago President: 15 Wolf Rd, Bourne MA 92532 Address: Joseph Drago Vice President: 15 Wolf Rd, Bourne MA 02532 Address: \_\_ Robin Drago 15 Wolf Rd, Bourne MA 02532 Address: \_ Joseph Drago Treasurer: 15 Wolf Rd, Bourne MA 02532 Address: \_\_\_ NOTE: If necessary you may anach 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.

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



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

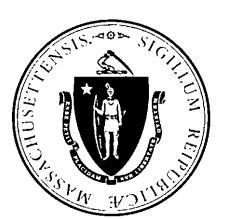
Date: January 09, 2019

To Whom It May Concern:

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

### DRAGO GENERAL CONTRACTING CORP.

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

William Tranin Gallein

on the date first above written.

Secretary of the Commonwealth

Certificate Number: 19010176850

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

Processed by: