

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Northeast Towers 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:

Vincent Murphy

Name of Person

Northeast Towers INC

Firm/Company

199 Brickyard Rd.

Address

Farmington, CT 06032

City/State and Zip code

vmurphy@northeasttowers.com

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

For further information concerning this matter, please call:

Vincent Murphy

at (860) 677-1999

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

\$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

2021 JUL 27 PM 2:09
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SECRETARY OF STATE
TALLAHASSEE, FL

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. Northeast Towers 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. Connecticut 3. 061068637
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 03/30/1995 5.
(Date of incorporation) (Date of duration, if other than perpetual)

6. 01/01/2021
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 199 Brickyard Rd. Farmington, CT 06032
(Principal office street address)
(Current mailing address, if different)

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

Name: Northwest Registered Agent LLC
Office Address: 7901 4th St N STE 300
St. Petersburg, Florida 33702
(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.

Tom Glover

(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. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

Chairman Name: Stephen Savino JR.
 Vice Chairman Address: 58 High Valley Dr.
 Director Canton, CT 06019
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Joseph Savino
 Vice Chairman Address: 40 Cherry Brook Rd.
 Director Canton, CT 06019
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Vincent Murphy
 Vice Chairman Address: 39 Blueberry Ln.
 Director Canton, CT 06019
FINANCE
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: Lori Savino
 Vice Chairman Address: 58 High Valley Dr.
 Director Canton, CT 06019
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Chairman Name: _____
 Vice Chairman Address: _____
 Director _____
 President _____
 Vice President _____
 Secretary Treasurer
 Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. *V. Murphy*
Vincent Murphy 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.

13. Vincent Murphy
 (Typed or printed name and capacity of person signing application)

DEPT. OF STATE
 DIVISION OF CLERK OF COURTS
 27 PM 2:09
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Secretary of the State of Connecticut Certificate of Legal Existence

Express Certificate

Date Issued: July 22, 2021

I, the Connecticut Secretary of the State, and keeper of the seal thereof, do hereby certify, that the certificate of incorporation for the below domestic stock corporation was filed in this office.

A certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far, as indicated by the records of this office, such corporation is in existence.

Business Details

Business Name	NORTHEAST TOWERS, INC.
Business ALEI	US-CT.BER:0510726
Formation Date	03/30/1995

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SECRETARY OF STATE
TALLAHASSEE, FL



Secretary of the State