TO: QUALIFICATION/TAX LIEN SECTION DIVISION OF CORPORATIONS SUBJECT: ____Masci_Construction_Inc. (Name of corporation - must include sulfix) W44 251:9 Dear Sir or Madam: The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", 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: Leonel Masci (Name of Person) 2010013336647 Masci Construction Inc. 11722794--01100--016 (Firm/Company) ++++131.25 ++++151.25 158 Crawford St. (Address) Leominster, MA 01453 (City, State and Zip Code) Should you need to call someone concerning this matter, please call: Leonel A. Masci at (_508__) _534 - 6580 (Name of Person) Area Code & Daytime Telephone Number COURIER ADDRESS: MAILING ADDRESS: Qualification/Tax Lien Sec. Qualification/Tax Lien Sec. **Division of Corporations Division of Corporations** 409 E. Gaines St. P. O. Box 6327 Tailahassee, FL 32399 Tallahassee, FL 32314



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

November 22, 1994

LEONEL MASCI MASCI CONSTRUCTION, INC. 158 CRAWFORD ST. LEOMINSTER, MA 01453

SUBJECT: MASCI CONSTRUCTION, INC. Ref. Number: W94000025139

We have received your document for MASCI CONSTRUCTION, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name listed in number one of the application must be identical to the name listed in the certificate of existence.

Number 6 of the application must be completed. If the corporation has not transacted business or conducted its affairs in Florida because it has not received confirmation from this office, please insert the words "upon qualification" in lieu of a date.

Your registered agent must be an individual, or an entity filed with this office. The individual or a representative of the entity must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6958.

Lee Rivers Document Examiner

Letter Number: 494A00050609

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FLORIDA DEPARTMENT OF STATE Imp. Smith Science of Store

Docember 6, 1994

LEONEL MASCI MASCI CONSTRUCTION, INC. 158 CRAWFORD ST. LEOMINSTER, MA 01453

SUBJECT: MASCI CONSTRUCTION, INC. Ref. Number: W94000025139

We have received your document for MASCI CONSTRUCTION, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must still correct the Registered Agent section of your application. We cannot accept "FDOT" as a Registered Agent. If your registered agent is the individual who signed line 10, Maria Masci, please list her name and address in section 9 of the application. If your registered agent is not an individual, the entity MUST be filed with this office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6958.

Lee Rivers Document Examiner

Letter Number: 194A00052012



FLORIDA DEPARTNENT OF STATT Sandra 5 Mortham Secretary of State

February 7, 1995

LEONEL MASCI MASCI CONSTRUCTION, INC. 158 CRAWFORD ST. LEOMINSTER, MA 01453

SUBJECT: MASCI CONSTRUCTION, INC. Ref. Number: W94000025139

We have received your document for MASCI CONSTRUCTION, INC. and your check(s) totaling \$131.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your corporation MUST designate a Registered Agent with a Florida street address. You have whited-out lines 9 and 10 of your application, but you failed to list a Registered Agent. Please note that the Registered Agent MUST sign the designation in line 10. We CANNOT file your application until you list a Registered Agent with a Florida street address, and provide a signature in line 10.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6958.

Lee Rivers Document Examiner

Letter Number: 995A00005231

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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:

 Masc1 Construction Inc. (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Massachusetts, USA			1
(State or country under the law of	which it is incorporated) 3. 04-2852135 (FEI number, if applicable)	<u>ت</u> ـــــ	
4. <u>2-07-85</u> (Data of Incorporation)	5. <u>Perloy Ac</u>		
6. JPON GUALLADO.	(Duration: Year corp. will cease to exist o	r perpetu:	al ') ,
(Date first transacted business in f	Florida. (See enctions 607.1501, 607.1502, and 817.155, F.S.)	57	į
7158_Crawford_Street	·		
Leominster, MA 01453	3		

(Current mailing address)

- 8. <u>Concrete Work, Utilities(water, sewer, drainage), Road Work, Bridge Repairs</u> (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
- 9. Name and street address of Florida registered agent:

Name: NILLY FZQUIERDO		
Office Address: 16760 NIV 83 PLACE		
HIALEAH -	, Florida , <u>330/6</u>	
•	(Zip Code)	-

10. 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)

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 addresses of officers and/or directors:

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DIRECTORS	
Chairman:	
Address:	
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Vice Chairman:	
Address:	. <u> </u>
	<u></u>
Director:	
Addross:	
Director:	
Address:	<u> </u>
OFFICERS	
President: <u>Andres Masci</u>	
Address:158_Crawford_Street	
Leominster, MA 01453	
Vice President: <u>Maria Masci</u>	
Address:158 Crawford St.	
Leominster, MA 01453	
Secretary: <u>Maria Masci</u>	
Address:	

Treasurer: Andres, Masci

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.	- Inio Trui - Clerk
	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14.	MARIA MASE - CLOXE

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



The Commonwealth of Massachusetts Office of the Georetary of State State House, Boston 02133

MICHAEL J. CONNOLLY SECRETARY OF STATE

November 9, 1994

TO WHOM IT MAY CONCERN

Thereby certify that

Masci Construction, Inc.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on **February 7, 1985**

I further certify that so far as appears of record here, and corporation still has a legal existence.

IN TESTIMONY of which, I have hereunto

affixed the Great Seal of the Commonwealth on the date first above written. 5:012 11

Secretary of State



Form U.D. 504 LMF