

F97000006546

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: CRAFFEY & COMPANY, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

900002369129--9
-12/11/97--01018--002
*****78.75 *****78.75

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:

LEE A. BURTON
(Name of Person)
CRAFFEY & CO. INC
(Firm/Company)
427 COLUMBIA RD
(Address)
HANOVER, MA 02339
(City/State/Zip)

FILED
97 DEC 11 PM 1:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
12/11

Should you need to call someone concerning this matter, please call:

LEE BURTON at (781) 829-0200
(Name of Person) (Area Code & Daytime Telephone Number)

COURIER ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**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. CRAFFEY & CO. 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 3. 04-3292541
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 11/95 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. NOT UNTIL 1998
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 427 COLUMBIA RD.
HANOVER MA 02339
(Current mailing address)
8. TO ACT AS GENERAL CONTRACTOR FOR CLIENTS WITH PROJECTS IN FLORIDA
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box **NOT** acceptable)
- Name: Michael Magnuson
- Office Address: 10150 Belle River Blvd. #2602
Jacksonville, FL., Florida, 32250
(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.

Michael Magnuson
(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: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

FILED
97 DEC 11 PM 1:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: KEVIN M. CRAFFEY

Address: 59 PILL HILL RD
DUXBURY, MA 02332

Vice President: STEVEN A. DELISLE

Address: 20 DEER HILL LN.
CARVER, MA 02330

Secretary: STEVEN A. DELISLE

Address: (SAME AS ABOVE)

Treasurer: KEVIN M. CRAFFEY

Address: (SAME AS ABOVE)

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

13. [Signature]
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. STEVEN A. DELISLE, VICE PRESIDENT
(Typed or printed name and capacity of person signing application)



William Francis Galvin
Secretary of the
Commonwealth

The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

November 25, 1997

To Whom It May Concern :

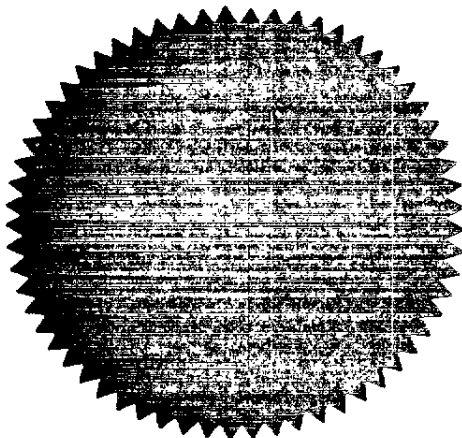
I hereby certify that,

Craffey & Co., Inc.

appears by records of this office to have been incorporated under the General Laws of this Commonwealth on **November 22, 1995**.

I also certify that so far as appears of record here, said corporation still has legal existence.

FILED
97 DEC 11 PM 1:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

William Francis Galvin

Secretary of the Commonwealth

NEM

* MGL Chapter 156B Section 83A provides that certain consolidations and mergers may be filed with the division within thirty days after the effective date of the merger or consolidation.