To: Qualification/Tax Lien Section Division of Corporations

(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", 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: $\frac{1}{100} \frac{1}{100} \frac{1}{100}$
(Name of Person)
OLD NUTFIELD BREWING (D. LTDE & Firm/Company)
22 Manchester Road (Address)
Derry NH 03038
Should you need to call someone concerning this matter, please call: 500024778468
Tim Killeen at (603) 434-9678 (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



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 3, 1998

JIM KILLEEN OLD NUTFIELD BREWING CO. LTD. 22 MANCHESTER RD. DERRY, NH 03038

SUBJECT: OLD NUTFIELD BREWING COMPANY, LTD.

Ref. Number: W98000007500

We have received your document for OLD NUTFIELD BREWING COMPANY, LTD. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list your Federal Employer Identification Number in the appropriate block. If applied for, enter "applied for", or if not applicable, enter "N/A".

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report fees due this office.)

The entity's period of duration must be listed on the application. Please insert the word "perpetual", if a specific date of dissolution or term of existence has not been specified.

The document must have original signatures.

Please list a more specific purpose for the corporation in section #8 of the application.

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 (850) 487-6093.

Freta Lott Corporate Specialist Supervisor

Letter Number: 098A00017914

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. (Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION 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.) usiness in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) (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) Office Address: _____, Florida, 34234 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)

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

of which it is incorporated.

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

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)	
Chairman: JAMES T. KILLEEN	
Address: 5 Donmac DRIVE	
Derry NH 03038	· · · · · · · · · · · · · · · · · · ·
T Dans C Daile	
Derry, N.H. 03038	
Director. 7770000	- EE 98
Address:	
Derry, NH 03038	<u> </u>
Director: WI/IAM NOVELLINE	
Address: 471 Andover St.	
NORTH HUDOVER, MA 01845	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)	
President: JAMES T. Silleen	<u> </u>
Address: 5 Donmac DRIVE	
Derry, NH 03038	
Vice President: Christine Victorthy	
Address: 5 Don Mac DRIVE	
Derry, NH 03038	· · · · · · · · · · · · · · · · · · ·
Secretary: Anna McCartty	
Address: 12 Meetinghouse Lane	
Milton, MA 02186	
Treasurer: Christine McCarthy	
Address: 5 Donmac DRIVE	
Derry, NH 03038	
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or direction	ectors.
Martin & May	
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the applicant	tion)
14. CHRISTINE KILLEEN, VICE CHAIRMAN) (Typed or printed name and capacity of person signing application)	

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State of New Hampshire Department of State

CERTIFICATE OF EXISTENCE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify OLD NUTFIELD BREWING COMPANY, LTD. is a New Hampshire corporation duly incorporated under the laws of the State of New Hampshire on May 3, 1994. I further certify that all fees and annual reports required by the Secretary of State's office have been received and that articles of dissolution have not been filed.

IN TESTIMONY WHEREOF, I hereto set my hand and cause to be affixed the Seal of the State of New Hampshire, this 23rd day of March, A.D. 1998

William M. Gardner Secretary of State

