F980000043/6

To: Qualification/Tax Lien Section Division of Corporations	
SUBJECT: CONTRACTOR Specially, (Name of corporation - in	nust include suffix)
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Auth "Certificate of Existence", and check are submitted to regist transact business in Florida.	norization to Transact Business in Florida", ter the above referenced foreign corporation to 000025338903 -07/21/9801049001
Please return all correspondence concerning this matter to the	he following: *****70.00 *****70.00
JUDITH A. AIKEN (Name of Pers	son) 351
CONTRACTOR Special	son) ALTY, INC. W98-16551 my)
1174 W. PALMVIEW (Address)	DRIVE .
Citrus Springs FL City/State/Z	
Should you need to call someone concerning this matter, plants	PILED STATE 29 AM 9: 1
	344 1362

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

> Confeich Confeich 74305



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

July 21, 1998

JUDITH A. AIKEN CONTRACTOR SPECIALTY, INC. 1174 W. PALMVIEW DR. CITRUS SPRINGS, FL 34434

SUBJECT: CONTRACTOR SPECIALTY, INC.

Ref. Number: W98000016551

We have received your document for CONTRACTOR SPECIALTY, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

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) 487-6095.

Letter Number: 998A00038607

Jennifer Sindt Document Examiner SECRETARY OF STATE OF ON OF CORPORAT SES

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned JUDITH A AIKEN , do hereby certify
that this Resolution of the Board of Directors of
a corporation duly organized and existing under the laws of the State of <u>New HampsHire</u>
was duly adopted on 501427 , 1998 .
Be it resolved, that CONTRACTOR SPECIALTY INC. (Corporate Name)
organized and existing in the State of New Hampshire, hereby adopts the name
CONTRACTOR Specially CRANE, INC. for use in Florida.
Dated: July 27, 1998
Signature of either Chairman, Vice Chairman or any officer
Judith A. Aiken Type or print name

PPLICATION 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" 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. NEW HAMPSHIRE

(State or country under the law of which it is incorporated)

4. APRIL 3, 1984

(Date of incorporation)

(Duration: Year corp. will cease to exist or "perpetual") 6. PROPOSED - Sept 1, 1998 ON OR ABOUT
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.) 7. 1174 W. PALMVIEW DRIVE

CITRUS Springs FL 34434

(Current mailing address) 8. MeCHANICAL 4 CRANE SERVICE

(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: JUDITH A. AIKEN
Office Address: 1174 W. PALMVIEW DRIVE CiTRUS Springs, Florida, 34434
(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)

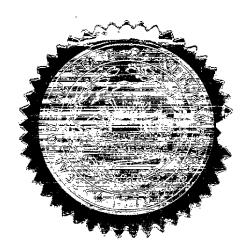
11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)		
A. DIRECTORS (Street address only - P.O. Box NOT acceptable)		
Chairman: JUDITH A AIKEN		
Address: 1174 W. PALMVIEW DRIVE		
CITRUS Springs FL 34434		
Vice Chairman: Allen N. AIKEN		
Address: 1174 W. PALMVIEW DRIVE		
CITRUS SPRINGS FL 34434		
Director:		
Address:		
	-	
Director:	 .	
Address:	<u> </u>	
B. OFFICERS (Street address only - P.O. Box NOT acceptable)		
President: JUDITH A AIKEN	9 2	
Address: 1174 W. PALMVIEW DRIVE	SECONOMIC SECONOMICS S	
CITRUS SpRINGS FL 34434	25 64 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Vice President: PIEN N. PIKEN	0000 0000 0000	
Λ	9: RATA	
Address: 1174 W. PALMVIEW DRIVE	8 = -	
CITRUS SPRINGS FL 34434		
Secretary:		
Address:		
		
Treasurer:		
Address:		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors	.	
Onder Ocho		
Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)		
14. JUDITH A AIKEN PRESIDENT	/ '-=······	
(Typed or printed name and capacity of person signing application)		

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 CONTRACTOR SPECIALTY, INC. is a New Hampshire corporation duly incorporated under the laws of the State of New Hampshire on April 3, 1984. 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 30th day of June, A.D. 1998

> William Mr. Garden William M. Gardner Secretary of State