



# MO2000002747

ACCOUNT NO. : 072100000032

REFERENCE : 719960 4305390

AUTHORIZATION :

COST LIMIT : \$ PPD

FILED  
02 AUG 29 PM 1:39  
SECRET  
TALLAHASSEE, FLORIDA

ORDER DATE : August 26, 2002

ORDER TIME : 9:33 AM

ORDER NO. : 719960-020

CUSTOMER NO: 4305390

CUSTOMER: Ms. Kim Calkin-mcellen  
Cole Schotz Meisel Forman &  
25 Main Street  
P.O. Box 800  
Hackensack, NJ 07602

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-08/29/02--01009--017  
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FOREIGN FILINGS

## MO2 0000002747

NAME: CONTROL MECHANICAL SERVICES,  
LLC

402400050517

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull -- EXT# 1115

EXAMINER: \_\_\_\_\_

BK  
RECEIVED  
02 AUG 29 AM 10:26  
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. CONTROL MECHANICAL SERVICES, LLC  
(Name of foreign limited liability company)
2. NEW JERSEY  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 04-370-1077  
(FBI number, if applicable)
4. JULY 8, 2002  
(Date of Organization)
5. PERPETUAL  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. UPON FILING  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. C/O CONTROL BUILDING SERVICES, INC.  
333 MEADOWLANDS PARKWAY, SECAUCUS, NJ 07094  
(Street address of principal office)

8. If limited liability company is a manager-managed company, check here ☒

9. The name and usual business addresses of the managing members or managers are as follows:

EDWARD D. TUREN, 333 MEADOWLANDS PARKWAY, SECAUCUS, NJ 07094

NEAL TUREN, 333 MEADOWLANDS PARKWAY, SECAUCUS, NJ 07094

JOSEPH ASKIN, 333 MEADOWLANDS PARKWAY, SECAUCUS, NJ 07094

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: MECHANICAL SERVICES

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

EDWARD D. TUREN

Typed or printed name of signee

02 AUG 29 PM 1:34  
FILED  
TALLAHASSEE, FLORIDA  
STATE OF FLORIDA

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

02 AUG 29 PM 11:34  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of the Limited Liability Company is:

CONTROL MECHANICAL SERVICES, LLC

2. The name and the Florida street address of the registered agent and office are:

Corporation Service Company  
(Name)

1201 Hays Street  
Florida street address (P.O. Box **NOT** ACCEPTABLE)

Tallahassee FL 32301  
(City/State/Zip)

*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.*

  
(Signature)

\$ 100.00 Filing Fee for Application  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (optional)  
\$ 5.00 Certificate of Status (optional)

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

CONTROL MECHANICAL SERVICES LLC

With the Previous or Alternate Name

FOUR SEASONS SERVICE GROUP (Alternate Name)

I, the Treasurer of the State of New Jersey,  
do hereby certify that the above-named  
New Jersey Domestic Limited Liability Company was  
registered by this office on July 8, 2002.

As of the date of this certificate, said business  
continues as an active business in good standing  
in the State of New Jersey, and its Annual Reports  
are current.

I further certify that the registered agent and  
registered office are:

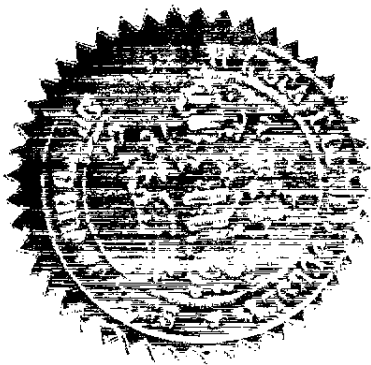
Edward D Turen  
333 Meadwolands Parkway  
Secaucus, NJ 07094

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TALLAHASSEE, FLORIDA

STATE OF NEW JERSEY  
DEPARTMENT OF TREASURY  
SHORT FORM STANDING

CONTROL MECHANICAL SERVICES LLC



IN TESTIMONY WHEREOF

hereunto set my hand and  
affixed my Official Seal  
at Trenton, this  
27th day of August, 2002

John E McCormac, CPA  
State Treasurer

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA