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ACCOUNT NO. : 072100000032

REFERENCE :

597689

AUTHORIZATION

COST LIMIT :

\$ 130.00

ORDER DATE: September 15, 2005

ORDER TIME: 2:04 PM

ORDER NO. : 597689-005

CUSTOMER NO: 7471500

CUSTOMER: Marty Mccabe

Commonwealth Contracting

203 Spark Street

Brockton, MA 02302

FOREIGN FILINGS

NAME:

COMMONWEALTH CONTRACTING

SERVICES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY ___ PLAIN STAMPED COPY

__ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER:

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limited	Liability Company)
Massachusetts	3
Jurisdiction under the law of which foreign limited liability company is organized)	3. (Fill number, if applicable) 5. Perpetual (Diration: Year limited liability company will cease
07/12/2000	5 Perpetual
(Date of Organization)	(Diration: Year limited liability company will cease exist or "perpetual")
Upon filing	
(Date first transacted business in F (See sections 608.501 & 608.502 F.	Florida, if prior to registration.) S. to determine penalty liability)
203 Spark St., Brockton, MA 02339-1622	• • •
76	F1
(Street Addres	s of Principal Office)
If limited liability company is a manager-manage	d company, check here 🗹
Min many and a second baseliness address of the second	
The name and usual business addresses of the ma	naging members or managers are as follows:
The name and usual business addresses of the marking william F. Tripp, 203 Spark St., Brockt	
William F. Tripp, 203 Spark St., Brockt	on, MA 02339-1622 (Manager)
	on, MA 02339-1622 (Manager)
William F. Tripp, 203 Spark St., Brockt	on, MA 02339-1622 (Manager) MA 02339-1622 (Member)
William F. Tripp, 203 Spark St., Brockton, Roger P. Cook, 203 Spark St., Brockton, Stephen L. Bowen, 203 Spark St., Brockton	on, MA 02339-1622 (Manager) MA 02339-1622 (Member) on, MA 02339-1622 (Member)
William F. Tripp, 203 Spark St., Brockton, Roger P. Cook, 203 Spark St., Brockton, Stephen L. Bowen, 203 Spark St., Brockton Attached is an original cartificate of existence, no more than 90	on, MA 02339-1622 (Manager) MA 02339-1622 (Member) on, MA 02339-1622 (Member) Odays old, duly authenticated by the official having castudy of
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William F. Tripp, 203 Spark St., Brockton, Roger P. Cook, 203 Spark St., Brockton, Stephen L. Bowen, 203 Spark St., Brockto Attached is an original certificate of existence, no more than 90 suits factor under the law of which it is organized (A photocombation of the certificate under outh of the translator must be sufficient under outh of the translator must be su	on. MA 02339-1622 (Member) MA 02339-1622 (Member) Odays old, duly authenticated by the official having cistudy of project in a foreign language, britted) or promoted in Florida: Provide environmental in services The execution of this document constitutes gury that the facts stated herein are true.)

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.

Z. The n	ame and the Florida street addr	ess of the registered agent and office	are:
	Corporation Service	: Сожрапу	
		(Name)	
	1201 Hays Street		
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	
	Tellahassee	PL 32301	
		City/State/Zip	
liability co agent and relating to obligation	ompany at the place designated l agree to act in this capacity. I o the proper and complete perfo	nd to accept service of process for the in this certificate, I hereby accept the a further agree to comply with the provisum and I am familian gent as provided for in Chapter 608, F	uppointment as registere sions of all statutes with and accept the

By: Carla Lohi
(Signature)

Carla Lohi
Asst Vice President

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



The Commonwealth of Massachusetts, Secretary of the Commonwealth State Rouse, Boston, Massachusetts 02188

William Francis Galvin Secretary of the Commonwealth

September 7, 2005

TO WHOM IT MAY CONCERN:

I hereby certify that a certificate of organization of a Limited Liability Company was filed in this office by

COMMONWEALTH CONTRACTING SERVICES LLC

In accordance with the provisions of Massachusetts General Laws Chapter 156C on July 12, 2000.

I further certify that said Limited Liability Company has filed all annual reports due and paid all fees with respect to such reports; that said Limited Liability Company has not filed a certificate of cancellation or withdrawal; and that, said Limited Liability Company is in good standing with this office.

I also certify that the names of all managers listed in the most recent filing are: WILLIAM F. TRIPP

I further certify, the names of all persons authorized to execute documents filed with this office and listed in the most recent filing are: WILLIAM F. TRIPP

The names of all persons authorized to act with respect to real property listed in the most recent filing are: WILLIAM F. TRIPP



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth

on the date first above written.

William Menino Gallein Secretary of the Commonwealth