Filing and License Fee: \$310.00 minimum

ID	Number:		



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615

## **BUSINESS CORPORATION**

## APPLICATION FOR CERTIFICATE OF AUTHORITY

resulant to the provisions of Section 7.1.2.1405 of the Conoral Laws of Dis C

CC	prporation	hereby applies for a Ce following statement:	rtificate of Aut	thority to trai	nsact business	in the State of	of Rhode Island,	and for th	hat ρψιροse
1.	The nam	ne of the corporation is	A+	F (	oenera	(on)	tractors	s. In	ıC.
2.	It is inco	rporated under the laws of		MA				<del></del>	
3.	The nam	ne, if different, which it elec	cts to use in RI	hode Island is	s:				
	"# <b>7</b> (	the name of the corpora corporated," or "limited," o case corporate endings for	or an abbreviat	tion thereof, t	ncorporation do then list the nex	es not contai me of the corp	in the word "cor oration with the	rporation," addition of	"company," f one of the
	qui	ne corporate name is not a alify and transact busines plication:	available in Rnd is in Rhode Is	ode Island, th land as state	nen set torth beid et in the "Fictitio	ow the lictilious ous Business	s name under wh Name Statemen	ich the cor <sub>i</sub> 't" to be file	poration will ed with this
4.	The date	of its incorporation is		1-1-0	) and the pe	eriod of its dura	ation is Perp	vetual	
5.	The add:	ress of its principal office i	n the state or c						
-	كعلعا		Ave		crsct		02725		
6,	The addr	ress of its proposed registe			_	- acc	Address, not P.O.		
		(City/Town)	, RI	(Zip Code)	$\delta$ and the nam	ne of its propos	ed registered ag	ent in hoo	de Islandat
	that add	ress is	Awn I	De Cost	A			AUG	9 7 7 7
7.		oose or purposes which it p	proposes to pu		ame of Agent) ansaction of bus	iness in Rhode	e Island are:	15 AH	
		GONSTRUCTION						15 Di	10 a 1
								<b>L</b>	<u>.</u>
8.		names and respective ad		directors (op	otional unless di	irectors are re	quired under the	alaws of the	he state or
	count	try of which it is incorporat	,						
	Direct	tos	<u>N</u> a <u>m</u> e	-		<u>A</u>	<u>ddre</u> ss		
	Direct								
	Direct	•					- SOLA FL	ill c	
	Direct				<del>-</del> - ·	$H: \mu_{\Omega}$	MA 46 34.	<u>1</u>	
	rm No. 150 evised: 12/0	AUG 2 4 2007	_			VIC.	adress  W 729NV Li	7 230 %	
1,40		By 035080	11.48			3.3e°.	13/1/1		

	(b) The names an	d respective a	ddresses of its principal	officers (ma	ndatory if directors	are not r	equired under the	laws of the
•	state or countr	y of which it is					4	
	<u>Name</u>			Address				
	President	Gerale	d R Alix	We3 Lee's Rewor Apre Somerset MA 0272				
	Vice President							
Treasurer Secretary		Steven	. J farias	187 Robinson St Fall River &				
		Debou	ah L Alix	<u>lele3</u>	Lee River	Ave	Somerset	MA 027
9.	The aggregate pur	oher of shares	which it has authority	to issue iten	nized by classes p	ar value	of shares, shares	s without par
Э.	value, and series, i				,,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	•
						Par V	alue or Statemen	it that
	Number of	Shares	Class	S	<u>eries</u>		s are without Par	
	100		(Omommo	M 110	Dar			
					<u> </u>			
10.	(a) An estimate of \$30.0		f all property to be ov	vned by the	corporation for th	e followi	ng year, whereve	er located, is
		of the value o	f the corporation's prop	erty to be	ocated within Rho	de Island	I during the follo	wing year is
	\$	· ·- · ·	•					
	located within	this state durin	percentage, of the prop g the following year bear ted, is	s to the valu	ie of all property of t	the corpo	oration to be owne	ed during the
11	(a) An estimate o		mount of husiness to					
	(b) An estimate of Island during t	of the gross a he following ye	mount of business to be ar is \$	e transacted	by the corporation	at or from	n places of busine	ss in Rhode
	corporation at	or from places by the corporat	a percentage, of the pr of business in this state tion during the following	e during the syear is _	following year bears	to the gr	oss amount there	of which will
12.	This application is laws of which it is in		by a certificate of Good	Standing iss	ued by the proper o	officer of	the state or coun	try under the
13.	This Application for later than the 90 <sup>th</sup> c	Certificate of lay after the da	Authority shall be effecte of this <u>filing</u>	tive upon fili	ng unless a specifie	ed date is	provided which	shall be no
				Under pen	alty of perjury,	declar	e and affirm t	hat I have
					his Application fo			
					npanying attachr erein are true and			statements
	मान	N7		comanico n		1011000.		
Da	te:	V I	<u> </u>		Sula 1	uf	<u> </u>	
	1 (			Sig	nature of Authoriz	zed Øffic	er of the Corpo	ration
					(deraid	KN	Jix	
					Type or Print Nar	ne of Au	tnorized Officer	•



# The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

Commonwealth

July 3, 2007

#### TO WHOM IT MAY CONCERN:

I hereby certify that according to the records of this office,

### A & F GENERAL CONTRACTORS, INC.

is a domestic corporation organized on **January 1, 2005**, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth
on the date first above written.

William Travino Galecin

Secretary of the Commonwealth



## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

A. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

