



State of Rhode Island and Providence Plantations

Office of the Secretary of State / Corporations Division

A. Ralph Mollis

Secretary of State

Corporations Division

Business Section

Phone: 401-222-3040
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corporations@sec.state.ri.us

Business Information Center

Phone: 401-222-2185
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Notary & Trademark Sections

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ucc@sec.state.ri.us

148 W. River Street
Providence, RI
02904-2615

October 2, 2007

M.E.A. ENGINEERING ASSOCIATES, INC.

C/O Alfred E. Muccini

64 Hobbs Brook Road

Weston, Massachusetts 02493

RE: M.E.A. ENGINEERING ASSOCIATES, INC.

ID# 263395

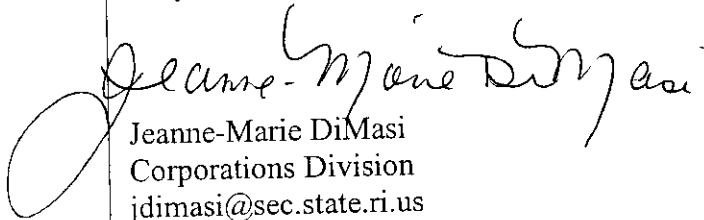
Dear Mr. Muccini:

On October 1, 2007 this office accepted for filing the Application for Certificate of Authority for the above-named corporation. However, it has come to my attention that the agent listed is not qualified to do business in Rhode Island with the Rhode Island Secretary of State's office. That company may be used if you also list a Rhode Island Residents name that may receive service of process and correspondence at that address.

Please file a Certificate of Correction and another Application for Certificate of Authority correcting listing in section #6 either a Rhode Island Resident or corporation with a street deliverable address. The forms may be obtained on the web at www.state.ri.us, click on corporations then corporation forms. Scroll down to Foreign Corporations and click on form 113 and 150. I am waiving the filing fee for this filing.

If you have any questions, please feel free to contact the undersigned.

Very truly yours,


Jeanne-Marie DiMasi
Corporations Division
jdimasi@sec.state.ri.us

No Fee
Filing Fee: ~~\$50.00~~

ID Number: 263395



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

CERTIFICATE OF CORRECTION

Pursuant to the provisions of Section 7-1.2-105 of the General Laws of Rhode Island, 1956, as amended, the undersigned corporation hereby submits the following Certificate of Correction:

1. The name of the corporation is:
M.E.A. ENGINEERING ASSOCIATES, INC.
2. The document to be corrected is **APPLICATION FOR CERTIFICATE OF AUTHORITY**
3. The document being corrected was originally filed on **SEPTEMBER 21, 2007**
4. Specify the inaccurate record of the corporate action or the defective or erroneous execution, seal or acknowledgement:
AGENT LISTED NOT QUALIFIED TO DO BUSINESS IN RHODE ISLAND WITH THE R.I. SECRETARY OF ' STATE'S OFFICE.
5. The corrected portion of the document states as follows:
ALPHONE MANCINO, 83 SOUTH ROSE STREET, EAST PROVIDENCE, R.I. 02914
ALPHONSE MANCINO
6. The document attached to this certificate is the corrected document.
7. This Certificate of Correction shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing _____

Under penalty of perjury, I declare and affirm that I have examined this Certificate of Correction, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: **OCTOBER 9, 2007**

Alfred E. Muccini
Signature of Authorized Officer of the Corporation

ALFRED E. MUCCINI, P.E. PRESIDENT

Type or Print Name of Authorized Officer

FILED

OCT 15 2007

By *[Signature]* 11:30

Filing and License Fee: \$310.00 minimum

ID Number: 263395



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

Pursuant to the provisions of Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1. The name of the corporation is M.E.A. ENGINEERING ASSOCIATES, INC.
2. It is incorporated under the laws of COMMONWEALTH OF MASSACHUSETTS
3. The name, if different, which it elects to use in Rhode Island is:
 - (a) *If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation," "company," "incorporated," or "limited," or an abbreviation thereof, then list the name of the corporation with the addition of one of the above corporate endings for use in Rhode Island:*
 - (b) *If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:*
4. The date of its incorporation is June 1, 1974 and the period of its duration is ONGOING
5. The address of its principal office in the state or country under the laws of which it is incorporated is 20 FELTON STREET, WALTHAM, MA 02453
6. The address of its proposed registered office in Rhode Island is 83 SOUTH ROSE STREET
(Street Address, not P.O. Box)
EAST PROVIDENCE, RI 02914 and the name of its proposed registered agent in Rhode Island at
(City/Town) (Zip Code)
that address is ALPHONSEMANCINO
(Name of Agent)
7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:
CONSULTING ENGINEERING
8. (a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state or country of which it is incorporated).

	<u>Name</u>	<u>Address</u>
Director	<u>N/A</u>	
Director		
Director		
Director		

FILED

OCT 15 2007

By [Signature] 11:30

(b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated).

	<u>Name</u>	<u>Address</u>
President	ALFRED E. MUCCINI	64 HOBBS BROOK ROAD, WESTON, MA 02493
Vice President	N/A	
Treasurer	GERALDINE E. MUCCINI	64 HOBBS BROOK ROAD, WESTON, MA 02493
Secretary	GERALDINE E. MUCCINI	64 HOBBS BROOK ROAD, WESTON, MA 02493

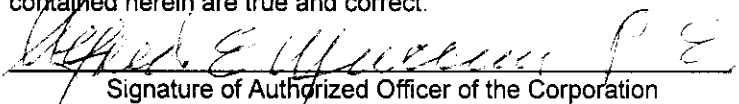
9. The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value or Statement that Shares are without Par Value</u>
12,500 AUTHORIZED	COMMON	N/A	NO PAR VALUE

10. (a) An estimate of the value of all property to be owned by the corporation for the following year, wherever located, is \$ 45,000.00.
- (b) An estimate of the value of the corporation's property to be located within Rhode Island during the following year is \$ 0.00.
- (c) An estimate, expressed as a percentage, of the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located, is 0 %. [divide (b) by (a) and multiply by 100 to obtain the percentage].
11. (a) An estimate of the gross amount of business to be transacted by the corporation during the following year is \$ 550,000.00.
- (b) An estimate of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year is \$ 15,000.00.
- (c) An estimate, expressed as a percentage, of the proportion that the gross amount of business to be transacted by the corporation at or from places of business in this state during the following year bears to the gross amount thereof which will be transacted by the corporation during the following year is 2.73 % [divide (b) by (a) and multiply by 100 to obtain the percentage].
12. This application is accompanied by a certificate of Good Standing issued by the proper officer of the state or country under the laws of which it is incorporated.
13. This Application for Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later than the 90th day after the date of this filing _____

Under penalty of perjury, I declare and affirm that I have examined this Application for Certificate of Authority, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: OCTOBER 9, 2007


Signature of Authorized Officer of the Corporation

ALFRED E. MUCCINI, P.E. PRESIDENT

Type or Print Name of Authorized Officer

