## Filing and License Fee; \$310.00 minimum

**ID Number:** 

<u>Address</u>



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**

DV 0144089	APPLICATIO	N FOR CERT	IFICATE OF	AUTHORITY	1		
Pursuant to the provisions of S corporation hereby applies for a the following statement:	Certificate of Author	ority to transact t	ousiness in the	State of Rhode I	sland, and for	that purpos	e submits
1. The name of the corporation	is THE LAND	WORKS	COLLABOR	4TIVE 1	NC.		
1. The name of the corporation 2. It is incorporated under the la	iws of MAS	SACHUSE	<i>417</i>				
3. The name, if different, which							
(a) If the name of the co "incorporated," or "limit above corporate ending	ted," or an abbrevi	ation thereof, the					
(b) If the corporate name is	s not available in R	hode Island the	set forth helou	v the fictitious na			
qualify and transact be application:					me Statement	" to be filed	with this
qualify and transact be	usiness in Rhode i		in the "Fictition	us Business Nai			with this
qualify and transact be application:  4. The date of its incorporation	usiness in Rhode in	15 200 2	in the "Fictition" and the peri	us Business Nai	is PERP	ETUAL	
qualify and transact be application:	usiness in Rhode in	15 200 2	in the "Fictition" and the peri	us Business Nau iod of its duration it is incorporated	is PERG	ETUAL	<u></u>
qualify and transact be application:  4. The date of its incorporation	is <u>XVSVST</u>	152002	in the "Fictition and the peri	iod of its duration it is incorporated  WOPCHATE  SERVICE	is PFRE	ETUAL 201605 2728	St.
qualify and transact be application:  4. The date of its incorporation is  5. The address of its principal of the address of its proposed is	is AUGUST ffice in the state or registered office in the	15 200 2 country under the	and the period along the laws of which	iod of its duration it is incorporated  WOPCHOTE  SERVICE (Street Ac	is PERF is 91 PE P MA Months INC.	2500TT 01605 2773 Box) 30	5t.
qualify and transact be application:  4. The date of its incorporation is  5. The address of its principal of the address of its proposed is  Wireless (City/Town)	is XUGUGT  ffice in the state or registered office in the	country under the Rhode Island is (Zip Code)	and the period laws of which	iod of its duration it is incorporated  WOPCHAIL  SERVICE  (Street Act	is PFR is 91 PF INC. Idress, not P.O. I registered agr	OLGOS  277  Box) Sul	5t.
qualify and transact be application:  4. The date of its incorporation is 5. The address of its principal of the address of its proposed is  William (City/Town)	is XUGUGT  ffice in the state or registered office in the	country under the Rhode Island is (Zip Code)	and the period laws of which	iod of its duration it is incorporated  WOPCHAIL  SERVICE  (Street Act	is PFR is 91 PF INC. Idress, not P.O. I registered agr	Olbos 2723 Box) Sol ent in Ritoria	5t. Effekal 112 300
qualify and transact be application:  I. The date of its incorporation is address of its principal of the address of its proposed is address of its proposed in the address is address is	is AUGUST  ffice in the state or registered office in f	Country under the Rhode Island is (Zip Code)	and the period allows of which and the name and the name and the factors and the name and the factors and the factors and the name and the factors and the factors and the name and the factors and the factor	iod of its duration it is incorporated  WOPGLIT  SERVICE (Street Act	is PERP is 91 Pk INC. Idress, not P.O. I registered agr	Olbos  277  Olbos  Box)  Box)  ent in Riboto	5t. Effekal 112 300
qualify and transact be application:  4. The date of its incorporation is  5. The address of its principal of the address of its proposed is  (City/Town) that address is	is AUGUST  ffice in the state or registered office in f	country under the Rhode Island is  Rhode Island is  (Zip Code)  EPU (FS)  (Narr	and the period and the name of Agent)	iod of its duration it is incorporated  WOPGLIT  SERVICE (Street Act	is PERP is 91 Pk INC. Idress, not P.O. I registered agr	Olbos 2723 Box) Sol ent in Ritoria	5t. Effekal 112 300

<u>Name</u>

Form No. 150 Revised: 12/05

Director Director Director Director

		officers (mandatory if directors are not required under the laws of the
	state or country of which it is incorporated).  Name	<u>Address</u>
		91 PRESCOTT ST. WOPCESTED, MA 01605
	Treasurer POBIRT S. MULCHING Secretary NA	91 PRESCOTT ST, WOPERSTR MADIBOTS
	CLERK MATTHEW J. MPNA	91 PRESCOTT ST. WOPEERTER MA-01605
9.	The aggregate number of shares which it has authority to is and series, if any, within a class, is:	ssue, itemized by classes, par value of shares, shares without par value,
	Number of Shares Class 200,000 COMMON	Par Value or Statement that  Series Shares are without Par Value  VITHOUT PAR VALUE
10.	(a) An estimate of the value of all property to be own \$	ned by the corporation for the following year, wherever located, is
	(b) An estimate of the value of the corporation's prope \$	erty to be located within Rhode Island during the following year is
	located within this state during the following year bears	ortion that the estimated value of the property of the corporation to be to the value of all property of the corporation to be owned during the %. [divide (b) by (a) and multiply by 100 to obtain the percentage].
11.	(a) An estimate of the gross amount of business to b \$	e transacted by the corporation during the following year is
	(b) An estimate of the gross amount of business to be Island during the following year is \$	transacted by the corporation at or from places of business in Rhode
	corporation at or from places of business in this state of	oportion that the gross amount of business to be transacted by the during the following year bears to the gross amount thereof which will ear is % [divide (b) by (a) and multiply by 100 to obtain
12.	This application is accompanied by a certificate of Good Sta of which it is incorporated.	anding issued by the proper officer of the state or country under the laws
13.	This Application for Certificate of Authority shall be effective than the 90 <sup>th</sup> day after the date of this filing	e upon filing unless a specified date is provided which shall be no later
Da	VIAV 7 2011	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.  Signature of Authorized Officer of the Corporation
		Type or Print Name of Authorized Officer



## The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02133

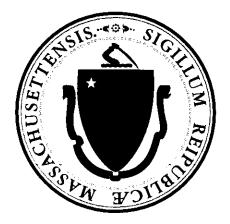
Date: May 09, 2011

To Whom It May Concern:

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

THE LANDWORKS COLLABORATIVE, INC.

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.

Secretary of the Commonwealth

William Travino Galecin

Certificate Number: 11053074070

Verify this Certificate at: http://corp.sec.state.ma.us/corp/Certificates/Verify.asp

Processed by: smc



## BOARD OF EXAMINERS OF LANDSCAPE ARCHITECTS

DEPARTMENT OF BUSINESS REGULATION DIVISION OF DESIGN PROFESSIONALS 1511 PONTIAC AVENUE, BUILDING 68-2 CRANSTON, RI 02920 Members of the Board
John C. Carter, Chair
Sara Bradford, Vice Chair
Steven Pilz, Secretary
Michael J. Dowhan
Scott Millar

(401) 462-9595 FAX: (401)462-9532

Administrative Assistant
Christina M. Styron

May 2, 2011

www.bdp.state.ri.us

LANDWORKS COLLABORATIVE

91 PRESCOTT STREET WORCESTER, MA 01605

Dear Sir/Madam:

Legal Counsel
Louis A. DeQuattro, Jr., CPA, Esq.

Your application for a Certificate of Authorization has been reviewed and approved by the Board of Examiners of Landscape Architects at their meeting on April 27, 2011. In accordance with the procedures adopted by this Board, you are requested to provide the following information.

You need to request a current <u>CERTIFICATE OF GOOD STANDING</u>, issued by the Rhode Island Secretary of State's Office, indicating your name change and that at the present time your corporate entity is in good standing insofar as registration procedures required by the Secretary of State's Office. The Board is requesting that the <u>original Certificate of Good Standing be provided within 60 days of the date of this letter. A copy of this letter must accompany your application, along with the required fee for a certificate of good standing, to the Secretary of State's office.</u>

You can contact the Secretary of State's Office by calling (401) 222-3040. Ask for corporations and explain that you need the necessary papers to amend your purpose.

**Upon receipt** of this **original <u>CERTIFICATE OF GOOD STANDING</u>**, the Board will issue your Certificate of Authorization. If you have any questions, please feel free to contact this Board.

Please be advised that until receipt of this original <u>CERTIFICATE OF GOOD STANDING</u>, your application is considered incomplete and you are not authorized to practice landscape architecture in the state of Rhode Island.

Very truly yours.

Steven Pilz, LA

Secretary

JCC/ibm