Filing and License Fee: \$310.00 minimum



Form No. 150 Revised: 06/11

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State Division of Business Services 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: The name of the corporation is Felcor Construction Corporation It is incorporated under the laws of _ 2. The name, if different, which it elects to use in Rhode Island is: 3. (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: The date of its incorporation is 51412011 and the period of its duration is Rivard The address of its principal office is 19 5. 6. The address of its proposed registered office in Rhode Island is (Street Address, not P.O. Box) and the name of its proposed registered agent in Rhode Island at (Name of Agent) The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: (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> St. Fairhaven, MH 02719 Director Director Director JUN 1 9 2012 Director W17300 BY.

	state or country of which it is incorporated).			pai onicers (mandatory ii director	is are not required under the laws of the
			<u>Name</u>		<u>Address</u>
	Pre	esident	David P. Teves	19 Rivard S	t. Fairhaven, MA 02719
	Vic	e President	Dimas Teves		UST. NewBedford ma 02
	C'o-treasurer Sandra		David Teves	y	St. Fairhaven MA 07710
			Sandra Teves	19 Rivan	
		•	Sandra Teves		
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:				
		Number of Shares		Co-i	Par Value or Statement that
		1000	E <u>Class</u> CNP	<u>Series</u>	Shares are without Par Value
		1000	<u> CNP</u>		<u> </u>
10.	(a)	\$ 250,000 following year, wh	= An estimater	ate of the value of all property	to be owned by the corporation for the
	(b)				
		Island during the following year.			
	(c)	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. {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.			
	(b)	20 83 8			
	(2)	or from places of business in Rhode Island during the following year.			
	(c)				
		thereof which will be transacted by the corporation during the following year. {divide (b) by (a) and multiply by 100 to obtain the percentage}			
12.	This	s application is accompanied by a certificate of Good Standing issued by the proper officer of the state or country under the s of which it is incorporated.			
13.	This	is Application for Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later			
	thar	nan the 90th day after the date of this filing			
					_
				Application for Certificate of	lare and affirm that I have examined this Authority, including any accompanying tements contained herein are true and
		11/1/10		. 0	0
Date	e:	6/14/12		Signature A da	red Officer of the Corporation
					ou omosi di ine corporation
				David P. Tevi	es
				i ype or Print Name	e of Authorized Officer



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

Date: June 15, 2012

To Whom It May Concern:

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

FELCOR CONSTRUCTION CORPORATION

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 Galicin

Certificate Number: 12067753720

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

Processed by: nmc



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

