

Application for Certificate of Authority

FOREIGN Business Corporation

→ Filing Fee: \$310.00 minimum

1. The name of the corporation is:	· — · · ·	
M/E Engineering, P.C.		
2. It is incorporated under the laws of.	New York State	
3. The name, if different, which it elects t	to use in Rhode Island is:	
"incorporated", or "limited," or an abbrev above corporate endings for use in Rhoo (b) If the corporate name is not available	urisdiction of incorporation does not contain the iation thereof, then list the name of the corporate Island: e in Rhode Island, then set forth below the fict ness in Rhode Island as stated in the "Fictitio"	ration with the addition of one of the citious name under which the
filed with this application:		
4. The date of its incorporation is: 0	1/24/1992	SE(C) 2011
4. The date of its incorporation is: 0 And the period of its duration is: CHECI		SECRE CORP 2018 SE
<u> </u>		RETARETA REPORT
And the period of its duration is: CHECI		S 22
And the period of its duration is: CHECI Perpetual (on-going)		RECEIVED RETARY DE REPORATIONS SEP 27 AM
And the period of its duration is: CHECI Perpetual (on-going) Date certain for dissolution	K ONE BOX ONLY	RECEIV RETARY REPORATII SEP 27
And the period of its duration is: CHECI Perpetual (on-going) Date certain for dissolution 5. The address of its principal office is:	Y 14604	RECEIVED RETARY DE REPORATIONS SEP 27 AM
And the period of its duration is: CHECK Perpetual (on-going) Date certain for dissolution 5. The address of its principal office is: 150 N. Chestnut Street, Rochester, N	Y 14604	RECEIVED RETARY OF RETARY OF REPORATIONS SEP 27 AM

State

RHODE ISLAND

MAIL TO:

Division of Business Services

City/Town East Providence

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

Zip Code **02914**

To provide engineerin	ig design consulting ser	vices on an	as needed ba	business in Rhode Island are: sis as we are engaged by clients with echanical and Electrical engineering design		
8. (a) The names and restate or country of whice	•	directors (op	otional, unless	directors are required under the laws of the		
NAME	The is incorporated).	ADDRESS				
TV UVC		ABRESS				
						
<u> </u>				· · · · ·		
	——————————————————————————————————————			Check the box to indicate an attachment		
, ,	espective addresses of its of which it is incorporated)		cers (mandato	ry if directors are not required under the laws		
OFFICE	NAME			ADDRESS		
PRESIDENT	Ronald C. Mead, P.E.		150 N. Ches	tnut Street, Rochester, NY 14604		
VICE PRESIDENT	John A. Dredger, P.E.		150 N. Ches	tnut Street, Rochester, NY 14604		
TREASURER	William P. Liberto, P.E.		60 Lakefront Blvd. Suite, 320, Buffalo, Ny 14202			
SECRETARY	William P. Liberto, P.E.		60 Lakefront Blvd. Suite, 320, Buffalo, Ny 14202			
	- · · · · · · · · · · · · · · · · · · ·	_		Check the box to indicate an attachment		
	per of shares which it has a f any, within a class, is:	authority to is	ssue; itemized	by classes, par value of shares, shares without		
NUMBER OF SHARES	CLASS		SERIES	PAR VALUE OR STATE NO PAR VALUE		
2000	Common	Non		No Par Value		
located within this state	e during the following year rever located. (Note: Perc	bears to the	value of all pro	e of the property of the corporation to be operty of the corporation to be owned during sheet.)		
at or from places of bus	siness in Rhode Island du pration during the following	ring the follov	ving year com	business to be transacted by the corporation pared to the gross amount thereof which will be btained from worksheet.)		

12. This application must be accompanied by a <u>Certificate of Good Standing/Letter of State</u> formation dated within 60 days of the date of this filling.	atus from the state or country of
13. Date when the Certificate of Authority will be effective: CHECK ONE BOX ONLY	· · · · · · · · · · · · · · · · · · ·
✓ Date received (Upon filing)	
Later effective date (Date must be no more than 90 days from the date of filing)	
Under penalty of perjury, I declare and affirm that I have examined this Application for Ce accompanying attachments, and that all statements contained herein are true and correct	
Type or Print Name of Authorized Officer	Date
Ronald C. Mead, P.E	September 4, 2018
Signature of Authorized Officer of the Corporation SIGN DOCUMENT HERE	







BE IT KNOWN THAT

M/E Engineering, P.C.

qualifications required by law is hereby authorized to practice having given satisfactory evidence of having the

Engineering as a Corporation

Mechanical

IN THE STATE OF RHODE ISLAND

Certificate of Authorization No.: 8675

Issued: 09/25/2018

Expires: 06/30/2020

Secretary

Chairperson

Saul B. ada-

Taxuas Kubulan

State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of M/E ENGINEERING, P.C. was filed on 01/24/1992, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation. I further certify the following:

A Biennial Statement was filed 02/17/1993.

A Biennial Statement was filed 04/14/1994.

A Biennial Statement was filed 01/26/1998.

A Biennial Statement was filed 02/18/2000.

A Biennial Statement was filed 12/31/2001.

A Biennial Statement was filed 02/19/2004.

A Certificate of Amendment was filed on 06/08/2005.

A Biennial Statement was filed 02/06/2006.

Certificate of Change was filed on 10/02/2006.

A Biennial Statement was filed 01/22/2008.

A Biennial Statement was filed 01/29/2010.

A Biennial Statement was filed 01/30/2012.

A Biennial Statement was filed 03/10/2014.

A Biennial Statement was filed 08/13/2018.

I further certify that no other documents have been filed by such corporation.



Witness my hand and the official seal of the Department of State at the City of Albany, this 30th day of August two thousand and eighteen.

BA .

SECRETARY OF STATIONS DIV