Filing fee: \$150.00 License fee: \$15.00 minimum (Section 7-1:1-124)



State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE CORPORATIONS DIVISION 100 NORTH MAIN STREET

100 NORTH MAIN STREET PROVIDENCE, RI 02903-1335 Corp. I.D. # 91440

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY OF

	JUDITH NITSCH ENGINEERING, INC.
To the Secret of the S	ary of State tate of Rhode Island
undersigned	at to the provisions of Section 7-1.1-103 of the General Laws, 1956, as amended, the corporation hereby applies for a Certificate of Authority to transact business in the de Island, and for that purpose submits the following statement:
First:	The name of the corporation isJUDITH_NITSCH_ENGINEERING, INC.
SECOND:	The name which it elects to use in Rhode Island is
	the corporation does not contain the word "corporation," "company," "incorporated," or "limited," or an ne of such words, insert the name of the corporation with the word or abbreviation which it elects to add thereto
THIRD:	It is incorporated under the laws of Massachusetts
	The date of its incorporation is September 15, 1989 and the period n is Dernatual
	The address of its principal office in the state or country under the laws of which it is is One Appleton Street, Boston, MA. 02116
123 Dyer	The address of its proposed registered office in Rhode Island is
	PATRICIA A. CANARIO. STUBBLE SIGNATURE SPECIAL ASSISTANT SECRETARY SIGNATURE SIGNATURE
	The purpose or purposes which it proposes to pursue in the transaction of business and are to provide consulting civil engineering services.

 $\widehat{\mathfrak{oc}}(\mathbb{N}) \approx \mathbb{C}(\mathbb{N}) + \mathbb{C}(\mathbb{M})$

TO CALL OF STRUE OF DELAED 96, 11177 C1 815

Еюнти: The names and respective addresses of its directors and officers are:

Name	Office	Address
Judith Nitsch, P.E.	Director	One Appleton Street, Boston, MA 02116
Lisa A. Brothers, P.E.	Director	One Appleton Street, Boston, MA 02116
	Director	

Judith Nitsch, P.E.	President	same as above
Lisa A. Brothers, P.E.		same as above
Lisa A. Brothers, P.E.	Secretary	
Judith Nitsch, P.E.	Treasurer	·····

Ninte: 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	Class	Series	or Statement that Shores are without Par Value
200,000	Authorized		\$ 0
100	Outstanding		\$ 0

TENTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Claşş	<u>Series</u>	Par Value per Share or Statement that Shares are without Par Value
200,000	Authorized		\$0
100	Outstanding		\$ 0

TWELFTH: An estimate of the value of its property to be located within Rhode Island during such year is \$.0.....

THERTEENTH: An estimate of the gross amount of business to be transacted by it during such year is \$.3.904.000.....

FOURTEENTH: An estimate of the gross amount of business to be transacted by it at or from places of business in Rhode island during such year is \$ 7.5,000......

FIFTEENTH: This application is accompanied by a copy of its articles of incorporation and all amendments thereto, duly authenticated by the proper officer of the state or country under the laws of which it is incorporated.

Dated July 24. 19.96 JUDITH NITSCH ENGINEERING INC. [Exact Corporate Name of corporation Making Application]
By Judittaviter n
and Lisa & Brothus
ItsS veretary Cienz
STATE OF Massachusetts Sc.
COUNTY OF Suffolk
At .JUDITH NITSCH ENGINEERING. INC. in said County on the25th day One Appleton Street, Boston, MA
ofJuly
.Judith.NitschP.E, who being by me first duly sworn, declared that
hedshe is thePresident
that ke/she signed the foregoing document as such President of the
corporation, and that the statements therein contained are true.
andra hea Bruce
Notary Public
(NOTARIAL SEAL)

O

•

.

; ; ; ;

!

:

•

·

.

()

0

RECEIVED

Har 13 3 22 ha 198

ARCHITECTS/ENGINEERS
PROFESSIONAL LIABILITY POLICY

CONTINENTAL CASUALTY COMPANY

CERTIFICATE OF INSURANCE --ARCHITECTS AND ENGINEERS PROFESSIONAL LIABILITY

To:

STATE-OF RHODE ISLAND-SECRETARY OF STATE 100 NORTH MAIN STREET PROVIDENCE, RI. 02903-1335

As set forth below, the named insured has in force, on the date indicated, a policy of professional liability insurance issued by Continental Casualty Company with a limit of liability of not less than the amount indicated.

This certificate is issued as a matter of information only and confers no rights upon the holder. By its issuance, it does not alter, change, modify or extend the provisions of said policy and does not waive any rights thereunder.

Name of Insured:

JUDITH NITSCH ENGINEERING, INC. 11

Address of Insured:

ONE APPLETON STREET BOSTON, MA 02116

Policy Number:

AEN 00-609-55-52

Policy Period:

01/01/98 - 01/01/01

Limit of Liability-Per Claim and Aggregate:

\$1,000,000 PER CLAIM/ \$1,000,000 ANNUAL AGGREGATE

Cancellation Notice:

In the event the above policy is canceled prior to the expiration date thereof, the company will provide $\underline{30}$ days prior written notice to the certificate holder named above.

AMES & GOUGH INSURANCE AGENCY, INC.

March 16, 1998

'	DUCER (617)472-3000	FAX (617)472-7248			ED AS A MATTER OF IN	03/16/1998 FORMATION
Burg	gin, Platner, Hurley In Franklin St.		ONLY AND HOLDER. T	CONFERS NO RI	GHTS UPON THE CERT E DOES NOT AMEND, E FORDED BY THE POLIC	IFICATE XTEND OR
	ncy, MA 02169		i Acientina		AFFORDING COVERAGE	
•	•••		COMPANY	CNA Insuranc		
Attn		Ext:	A			
INSU	RED Judith Nitsch Engine	eering Inc	COMPANY B	KEMPER NAT'L	P&C COS	
V	One Appleton Street			, , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	·
•	Boston; MA 02116	204.00	COMPANY	, <u>, , , , , , , , , , , , , , , , , , </u>	And one	
	Mariana Mariana Mariana Mariana		COMPANY		<u>, , , , , , , , , , , , , , , , , , , </u>	•
	(50.4.0.F.)		, D		· · · · · · · · · · · · · · · · · · ·	· ·
	INDICATED, NOTWITHSTANDING AN CERTIFICATE MAY BE ISSUED OR M	CIES OF INSURANCE LISTED BELOW I Y REQUIREMENT, TERM OR CONDITIO IAY PERTAIN, THE INSURANCE AFFOR SUCH POLICIES, LIMITS SHOWN MAY I	ON OF ANY CONTRACT	OR OTHER DOCUM DESCRIBED HERE	MENT WITH RESPECT TO V	VHICH THIS
COLTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	цип	
	GENERAL LIABILITY		i	<u> </u>	GENERAL AGGREGATE	\$ 2,000,000
	X COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG	\$ 2,000,000
Α	CLAIMS MADE X OCCUR	130708353	01/01/1998	01/01/2001	PERSONAL & ADV INJURY	\$ 1,000,000
	OWNER'S & CONTRACTOR'S PROT				FIRE DAMAGE (Any one fire)	\$ 1,000,000 \$ 100,000
				:	MED EXP (Any one person)	\$ 100,000 \$ 10,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT	1,000,000
	ALL OWNED AUTOS X SCHEDULED AUTOS	i			BODILY INJURY (Per person)	\$
A i	HIRED AUTOS .	3203876 	11/28/1997	11/28/1998	BODILY INJURY (Per accident)	s
		;			PROPERTY DAMAGE	s
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
	ANY AUTO				OTHER THAN AUTO ONLY.	
				·	EACH ACCIDENT	
	EXCESS LIABILITY	l]	AGGREGATE LEACH OCCURRENCE	s 5,000,000
Α	X UMBRELLA FORM	130708353	01/01/1998	01/01/2001	AGGREGATE	\$ 5,000,000
	OTHER THAN UMBRELLA FORM	••		,,		S
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				X TORY LIMITS ER	L
В		7CQ61062902 V	05/01/1997	05/01/1998	EL EACH ACCIDENT	\$ 1,000,000
	PARTNERS/EXECUTIVE			,,	EL DISEASE - POLICY LIMIT	\$ 1,000,000
	OTHER]		<u>.</u>	EL DISEASE - EA EMPLOYEE	1,000,000
	VALUABLE PAPERS	100700053	01/01/1000	0. (0. (0.0)	}	
Α		130708353	01/01/1998	01/01/2001	LIMIT \$1	.00,000
				<u> </u>	DED.	250.
	PRIPTION OF OPERATIONS/LOCATIONS/V ERAL CERTIFICATE	EHICLES/SPECIAL ITEMS				
	•					
CEF	RTIFICATE HOLDER		CANCELLAT	ION		
			SHOULD AN'	OF THE ABOVE DESC	RIBED POLICIES BE CANCELL	ED BEFORE THE
			EXPIRATION	DATE THEREOF, THE	SSUING COMPANY WILL ENDE	AVOR TO MAIL
	STATE OF RHODE TSLA	VB2 HIJ EO E IT ARIT	_30_ DAY	S WRITTEN NOTICE TO	THE CERTIFICATE HOLDER N	AMED TO THE LEFT,
	STATE OF RHODE ISLANDS, Hd EO E / BUILD SECRETARY OF STATE				CE SHALL IMPOSE NO OBLIGA	
	100 NORTH MAIN STRE	ET Ali latida për 300 e meme e unitavi avors	OF ANY KIND	PRESENTATIVE COMPANY	JRANCE AGEN	ATYEINC.
	PROVIDENCE, KI U290	RECKLEYAN OE R zeef-e <u>BEOGINED</u>	EDWARD PL		/ A	· 🛕
ACC	ORD 25-S (1/95)	<u>05/0300</u>	CUMARU PL	CHILL SO	- 1-OACOND	CORPORATION 198

PUEDIL ..

ARCHITECTS/ENGINEERS PROFESSIONAL LIABILITY POLICY

CONTINENTAL CASUALTY COMPANY

CERTIFICATE OF INSURANCE --ARCHITECTS AND ENGINEERS PROFESSIONAL LIABILITY

To:

As set forth below, the named insured has in force, on the date indicated, a policy of professional liability insurance issued by Continental Casualty Company with a limit of liability of not less than the amount indicated.

This certificate is issued as a matter of information only and confers no rights upon the holder. By its issuance, it does not alter, change, modify or extend the provisions of said policy and does not waive any rights thereunder.

Name of Insured:

JUDITH NITSCH ENGINEERING, INC.

Address of Insured:

ONE APPLETON STREET BOSTON, MA 02116

المراز والأساور مواسات ووالعوالما الومسوموسون مور

Policy Number:

AEN 00-609-55-52

Policy Period:

01/01/97 - 01/01/98

Limit of Liability-Per Claim and Aggregate:

\$1,000,000

Cancellation Notice:

In the event the above policy is canceled prior to the expiration date thereof, the company will provide 30 days prior written notice to the certificate holder named above.

AMES & GOUGH INSURANCE AGENCY, INC.

January 22, 1997

المنطقة المنطقة السيس	<u></u>						
ACC	DRD. CERTI	FICATE OF INS	URANC	E		01/23/97	
PRODUCER	BURGIN PLATN	ER HURLEY INS AGCY	ONLY AN HOLDER.	THIS CERTIFICA	UED AS A MATTER (IO RIGHTS UPON T ATE DOES NOT AME AFFORDED BY THE I	OF INFORMATION HE CERTIFICATE ND, EXTEND OR	
	14 FRANKLIN	ST		COMPANIES	AFFORDING COVER	AGE	
	QUINCY	MA 02169	COMPANY A	CNA INS	URANCE CO		
INSURED	JUDITH NITSC	H ENGINEERING INC	COMPANY	KEMPER I	NAT'L P&C COS	}	
	ONE APPLETON BOSTON		C		····		
	DOSTON	MA 02116	COMPANY				
CERTIF	TO CERTIFY THAT THE PO TED, NOTWITHSTANDING AI TICATE MAY BE ISSUED OR	OLICIES OF INSURANCE LISTED BELOW NY REQUIREMENT, TERM OR CONDIT MAY PERTAIN, THE INSURANCE AFF F SUCH POLICIES. LIMITS SHOWN MA	ION OF ANY CONTI ORDED BY THE PO	RACT OR OTHER (LUCIES DESCRIBEI	DOCUMENT WITH RESPECT TO	T TO WHICH THIS	
CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	i LIMAT	* 8	
—	IAL LIABILITY	130708353	1/01/95	1/01/98	GENERAL AGGREGATE	\$2,000,000	
	OMMERCIAL GENERAL LIABILITY CLAIMS MADE X OCCUR WHER'S & CONTRACTOR'S PROT				PRODUCTS - COMP/OP AGG PERSONAL & ADV INJURY EACH OCCURRENCE FIRE DAMAGE (Any one fire)	\$1,000,000 \$1,000,000 \$ 100,000	
A AUTOM	IOBILE LIABILITY	130708353	1/01/95	1/01/98	MED EXP (Any one person)	1,000,000	
	L OWNED AUTOS				BODILY INJURY	\$	
,— <u> </u>	HEDULED AUTOS RED AUTOS	t !			(Per person)	•	
1	N-OWNED AUTOS				(Per accident)	\$	
		i !			PROPERTY DAMAGE	\$	
	RE LIABILITY Y AUTO				AUTO ONLY - EA ACCIDENT OTHER THAN AUTO ONLY:	\$	
				' 	EACH ACCIDENT	•	
F- 1	S LIABILITY	130708353	1/01/95	1/01/98	EACH OCCURRENCE	\$5,000,000	
	IBRELLA FORM HER THAN UMBRELLA FORM				AGGREGATE	\$5,000, <u>000</u>	
	ERS COMPENSATION AND YERS' LIABILITY	7CQ61062901	5/01/96	5/01/97	X STATUTORY LIMITS		
	ROPRIETOR/ INCL I	I			DISEASE - POLICY LIMIT	\$1,000,000 \$1,000,000	
OFFICE	RS ARE: EXCL	•	: :		DISEASE - EACH EMPLOYEE		
OTHER			· !		Jah 27	0.000 5.000	
GENE	OF OPERATIONS A CONTINUE OF OPERATIONS A CERTIFICAT				1 30 PH	OBJVED OBVED	
CERTIFICA	ATE HOLDER		CANCELLAT		. 97	<u>حدا</u> کید.	
STATE OF RHODE ISLAND STATE OF RHODE ISLAND STATE OF RHODE ISLAND EXPRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAI							
SECRETARY OF STATE			1	30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT,			
	100 NORTH MAIN STREET PROVIDENCE, RI. 02903-1335			BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.			
	,	(I. 0270J 1JJJ		EPRESENTATIVE NS	URANCE AGENCY		
ACORD 2	5-S (3/93)		1 2 2 3 1 1 1	7	ward profession	RPORATION 189	

DDESIDENT