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## 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 AMENDED CERTIFICATE OF AUTHORITY

Pursuant to the provisions of Section 7-1.2-1411 of the General Laws of Rhode Island, 1956, as amended, the undersigned corporation hereby applies for an Amended 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 Technical Ald Crystal, Inc.					
2.	It is incorporated under the laws of Massachusetts					
3.	A Certificate of Authority was issued to the corporation by the office of the Secretary of State of the State of Rhode Island on					
4.	Technical Ald Corporation					
	(If no change, so indicate.)					
5.	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:					
6.	The corporation desires to pursue in the transaction of business in Rhode Island other or additional purposes than those set forth in its prior Application for a Certificate of Authority, as follows:					
	(If no other or additional purposes are proposed, insert "No Change.")					
	No Change					
	FILED					
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7.	If there has been an increase in the authorized shares of the corporation, list the total number of authorized shares, including the increase (If there has been no increase in shares, insert *no change*):					
	Total Number of Authorized Shares	<u>Class</u>	<u>Series</u>	Par Value or Statement that Shares are without Par Value		
	No Change	<u> </u>				
8.	(a) An estimate of the value of all property to be owned by the corporation for the following year, wherever located, is \$					
	(b) An estimate of the value of the corporation's property to be located within Rhode Island during the following year is \$					
	corporation to be located withi	n this state during t g the following yea	the following year bears to	stimated value of the property of the the value of all property of the%. [divide (b) by (a) and		
9.	(a) An estimate of the gross amou	unt of business to b	e transacted by the corpo	ration during the following year is		
	(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 \$					
(c) An estimate, expressed as a percentage, of the proportion that the gross amount of business to be transted the corporation at or from places of business in this state during the following year bears to the gross and thereof which will be transacted by the corporation during the following year is%. [divide (land multiply by 100 to obtain the percentage]						
10.	<ol> <li>Except as herein modified, the original Application for Certificate of Authority continues in full force and effect and is hereby confirmed, ratified and incorporated by reference into this Application for Amended Certificate of Authority.</li> </ol>					
11.	<ol> <li>This Application for Amended Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later than the 90<sup>th</sup> day after the date of this filing</li></ol>					
Da	te: <u>May 21, 2007</u>		examined this Application including any accompassion accompassion are the control of the control	y, I declare and affirm that I have for Amended Certificate of Authority, anying attachments, and that all ein are true and correct.  orized Officer of the Corporation		
	,		Daniel A. Lasman, Asst.			
			Type or Print	Name of Authorized Officer		

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