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(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
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TALEAMASSEE, FLORID

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MAY 1 5 2015

S. GILBERT

COVER LETTER

	Filing Sec					
SUBJECT:	Fairbank	s Energy Servic	es Inc.			
SCHOLCI.		Name	of corpora	ition	- must include suffix	
Dear Sir or M	ladam:					
"Certificate o	f Existenc		te of Good	Stand	Authorization to Transac ding" and check are sub ss in Florida.	
Please return	all corresp	ondence concer	ning this m	atter	to the following:	
Lisa Brown						
· - · · · · · · · · · · · · · · · · · ·			Name	of P	Person	
State Tax Ad	visors					
			Firm/	Comp	oany	
1308 Kingwo	od Dr #10	2				
	·		A	ddre	SS	
Kingwood, TX	K 77339					
·			City/Sta	ite an	d Zip code	
Amy.Campar	nale@Fairt	anksEnergy.co	n			
		E-mail addre	ss: (to be us	sed fo	or future annual report n	otification)
For further in	formation	concerning this	matter, plea	ase ca	all:	
Lisa Brown			281 at (358-1060 x 34	
Name	e of Person	1	(rea C	ode & Daytime Telepho	one Number
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Enclosed is a check for the following amount:				MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
■ \$70.00 Fil		\$78.75 Fili Certificate	ng Fee &	О	\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

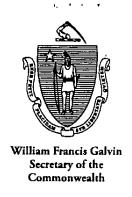
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

"Inc.," "Co.," "Co	orp," "Inc," "Co," or "Corp.")				
(If name unavaila	ible in Florida, enter alternate corporate name	adopted for the purpose of transacting but	siness in Florida)		
Massachusetts		46-5159958			
	y under the law of which it is incorporated)	(FEI number, if applicable)			
03/19/2014	5.	Perpetual			
	of incorporation)	(Duration: Year corp. will cease to exist or "perpetual")			
6					
	(SEE SECTIONS 607.1501 & 607.1	n Florida, if prior to registration) 502, F.S., to determine penalty liability)			
7. 50 Derby Street	Suite 260, Hingham, MA 02043				
	(Principal office add	lress)			
50 Derby Street	t Suite 260, Hingham, MA 02043		- -		
	(Current mailing add	lress)	走過 5		
8. Name and stree	et address of Florida registered agent: (P.	O. Box NOT acceptable)	HAY II		
Name:	Corporation Service Company				
Office Address:	1201 Hays Street		AHIO:		
	Tallahassee	32301 , Florida	### 59 ####		
	(City)	(Zip code)	>		
Having been nam designated in this further agree to c duties, and I am f	ent's acceptance: sed as registered agent and to accept serve application, I hereby accept the appoint omply with the provisions of all statutes familiar with and accept the obligations. Corporation Service Company By: August L. Du	ment as registered agent and agree to relative to the proper and complete p	o act in this capacity. I verformance of my		

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: _ Address: _ Vice Chairman: ___ Address: __ Director: _ **B. OFFICERS** Peter Fairbanks President: 50 Derby Street, Suite 260 Address: Hingham, MA 02043 Vice President: Address: Ross Fairbanks Secretary: 50 Derby Street, Suite 260, Hingham, MA 02043 Adam Fairbanks Treasurer: 50 Derby Street, Suite 260, Hingham, MA 02043 Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. Signature of Director or Officer The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Adam Fairbanks, Treasurer 13.



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

Date: May 01, 2015

To Whom It May Concern:

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

FAIRBANKS ENERGY SERVICES 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

Vian Tranino Gallein

Certificate Number: 15052995010

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

Processed by: hma