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# State of New Hampshire

DEPARTMENT OF ADMINISTRATIVE SERVICES

25 Capitol Street – Room 100  
Concord, New Hampshire 03301  
(603) 271-3201 | [Office@das.nh.gov](mailto:Office@das.nh.gov)

Charles M. Arlinghaus  
Commissioner

Catherine A. Keane  
Deputy Commissioner

Sheri L. Rockburn  
Assistant Commissioner

February 13, 2024

His Excellency, Governor Christopher T. Sununu  
and the Honorable Council  
State House  
Concord, New Hampshire 03301

## REQUESTED ACTION

- 1) Authorize the Division of Public Works Design and Construction to enter into a contract with Triple Construction, LLC (VC#395282), Hudson, New Hampshire, for a total price not to exceed \$188,101 for DPW Project No. 81211, Contract E, NHSP-M Roof Replacements – Plaza Deck, Concord, New Hampshire. This contract is effective upon Governor and Council approval through July 26, 2024, unless extended in accordance with the contract terms. **100% Capital Funds.**
- 2) Further authorize the amount of \$16,500 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC#311152), for engineering services provided, bringing the total to \$204,601. **100% Capital Funds.**

Funding is available in account titled Department of Corrections as follows:

	<u>FY 2024</u>
02-46-46-460030-92940000 L21:1III1-NHSP/M Roof Replcmn	
034-500162 – Repair/Renovation Buildings - Construction	\$ 188,101
034-500162 – Repair/Renovation Buildings - DPW Fees	<u>\$ 16,500</u>
<b>Grand Total</b>	<b>\$ 204,601</b>

## EXPLANATION

Pursuant to Chapter 107:1, III, 1, Laws of 2021, funds are available for roofing replacements at the NH State Prison for Men. The work of this project includes the removal of an existing poured concrete plaza deck, insulation, and roofing membrane and installation of a new concrete paver system, insulation and membrane.

The existing plaza deck waterproofing system has failed and water is entering the building. The leaking is occurring in the Kitchen, Bakery and mechanical rooms. This is causing structural damage,

health issues related to the preparation of food, and potential damage to electrical and mechanical equipment. The roofing needs to be repaired to prevent further structural damage, eliminate the issue with unsanitary conditions in the Kitchen and Bakery areas, and prevent any damage to the costly equipment in the mechanical room.

A public bid opening was held on December 20, 2023. Two (2) bid proposals were received and the contract was awarded to the lowest qualified bidder. The low bid is 6% under the Department estimate and is considered within industry standards.

The contractor has been pre-qualified by the Department of Transportation. The contract has been approved by the Attorney General as to form and execution; and the Department of Administrative Services has certified that the necessary funds are available. Copies of the fully executed contract are on file at the Secretary of State's Office and the Department of Administrative Services, Division of Public Works Design and Construction.

Respectfully submitted,



Charles M. Arlinghaus,  
Commissioner

Department Estimate:	\$ 200,000
Low Base Bid (without Alternates):	<u>\$ 188,101</u>
Under Estimate:	\$ 11,899



# ABC Bid Data

CONCORD  
81211E  
NON-FEDERAL

Item No.	Description	Unit	Quantity	P&E		TRIPLE CONSTRUCTION LLC 9 EXECUTIVE DRIVE SUITE 3 MILFORD, NH 03051		WEATHERGUARD INDUSTRIES METALS, LLC 36 SMITH STREET NORTHAMPTON, MA 01060	
				Unit Price	Total	Unit Price	Total	Unit Price	Total

**Items**

901	REPLACE THE PLAZA DECK ROOFING SYSTEM W/HT NEW ROOFING SYSTEM AND CONCRETE PAVERS	U	1.00	\$150,000.00	\$150,000.00	\$138,101.00	\$138,101.00	\$162,800.00	\$162,800.00
902	ALLOWANCE #1 FOR OWNER INITIATED CHANGES	\$	50,000.00	\$1.00	\$50,000.00	\$1.00	\$50,000.00	\$1.00	\$50,000.00
<b>Totals:</b>					<b>\$200,000.00</b>		<b>\$188,101.00</b>		<b>\$212,800.00</b>
<b>Alt. Totals:</b>									
<b>Totals:</b>					<b>\$200,000.00</b>		<b>\$188,101.00</b>		<b>\$212,800.00</b>



# ABC Bid Data

CONCORD  
81211E  
NON-FEDERAL

PROJECT: CONCORD  
STATE PROJECT NUMBER: 81211E  
FED. PROJECT NUMBER: NON-FEDERAL  
DATE BIDS OPEN: December 20, 2023,  
SCOPE OF WORK: NHSP-M ROOF REPLACEMENT - PLAZA DECK  
COMPLETION DATE: July 26, 2024  
LOCATION: Merrimack

Awarded To: TRIPLE CONSTRUCTION LLC  
5 EXECUTIVE DRIVE SUITE 3  
HUDSON, NH 03051

Amount: \$188,101.00  
Award Date:

Certified by: \_\_\_\_\_  
Director of Project Development

## Summary of Bidders

Contractor	Bid Amount	Rank
TRIPLE CONSTRUCTION LLC 5 EXECUTIVE DRIVE, SUITE 3, HUDSON NH 03051	\$188,101.00	A
WEATHERGUARD INDUSTRIES/SMJ METALS, LLC 36 SMITH STREET, NORTHAMPTON MA 01060	\$212,800.00	B

### BID AWARD

Award To: Triple Construction, LLC  
Contract Award: \$ 188,101.00  
Negotiated: Yes/No?: NO  
Alternates: Yes/No?: NO  
Using Agency: Corrections  
Authorized By: Theodore Kupper, PC  
Date: 01032024

Item 901: \$ 138,101.00      Item 906: \$ \_\_\_\_\_  
Item 902: \$ 50,000.00      Item 907: \$ \_\_\_\_\_  
Item 903: \$ \_\_\_\_\_      Item 908: \$ \_\_\_\_\_  
Item 904: \$ \_\_\_\_\_      Item 909: \$ \_\_\_\_\_  
Item 905: \$ \_\_\_\_\_      Item 910: \$ \_\_\_\_\_

BASE BID TOTAL: \$ 188,101.00

Alternate #1: \$ \_\_\_\_\_      Alternate #6: \$ \_\_\_\_\_  
Alternate #2: \$ \_\_\_\_\_      Alternate #7: \$ \_\_\_\_\_  
Alternate #3: \$ \_\_\_\_\_      Alternate #8: \$ \_\_\_\_\_  
Alternate #4: \$ \_\_\_\_\_      Alternate #9: \$ \_\_\_\_\_  
Alternate #5: \$ \_\_\_\_\_      Alternate #10: \$ \_\_\_\_\_

GRAND TOTAL: \$ \_\_\_\_\_



Division of Public Works

# Bid Report

The undersigned, hereinafter referred to as principal or bidder, hereby proposes to furnish all materials and perform all labor necessary to complete the work described in the caption hereof, in accordance with the plans, current Standard Specifications, and special provisions, for the prices set for in the Total Bid. Failure to complete and submit this bid in its entirety or falsification of bid documents will result in the entire proposal being considered irregular and may be rejected by the Department of Administrative Services, Division of Public Works. Plans and specifications on this project cannot be transferred to any other firm or organization for the purpose of submitting a bid as a general contractor without the knowledge and authority of the department. Those who sign (manually and electronically) and the firm for which they are authorized to sign, do so under the penalty of perjury as specified by the laws of the United States and the State of New Hampshire.

State Contract Number: 81211E CONCORD

## Contractor Profile

Firm **TRIPLE CONSTRUCTION LLC**  
Contractor ID **395282**  
Address **5 EXECUTIVE DRIVE SUITE 3  
HUDSON NH 03051**  
  
Phone **(603)318-7280**  
FAX  
E-Mail **mbrockelman@triple-construction.com**

Authorized Signature: Is/ Mark Brockelman

## Bid Bond

Verified

Auth Code/Check# **SNH12194614**

## Receipt of Addenda

Sequence	Date	
1	12/14/2023	Yes



Division of Public Works

## PS&E Comparison

CONCORD  
81211E  
NON-FEDERAL

Item No.	Description	Unit	Quantity	A-Bidder		PS&E		A-PS&E Difference
				Unit Price	Total	Unit Price	Total	
<b>Items</b>								
901	REPLACE THE PLAZA DECK ROOFING SYSTEM WIHT NEW ROOFING SYSTEM AND CONCRETE PAVERS	U	1.00	\$138,101.00	\$138,101.00	\$150,000.00	\$150,000.00	(\$11,899.00)
902	ALLOWANCE #1 FOR OWNER INITIATED CHANGES	\$	50,000.00	\$1.00	\$50,000.00	\$1.00	\$50,000.00	\$0.00
<b>Total:</b>					\$188,101.00		\$200,000.00	(\$11,899.00)

Department of Administrative Services, Division  
of Public Works

Total Bid for Award Consideration

Proposal

**\$188,101.00**

Contract Number: 81211E

Bid Opening Date: 20-Dec-2023

Contract Name: CONCORD

Project Funding: State

Proposal For: 395282 - TRIPLE CONSTRUCTION LLC

**Items**

Seq#	Item #	Description	Unit	Quantity	Unit Price	Extended Price
1	901	REPLACE THE PLAZA DECK ROOFING SYSTEM WIHT NEW ROOFING SYSTEM AND CONCRETE PAVERS	U	1.000	\$138,101.00	\$138,101.00
2	902	ALLOWANCE #1 FOR OWNER INITIATED CHANGES	\$	50,000.000	\$1.00	\$50,000.00

**Total for Category Items**

**\$188,101.00**

**Total Bid for Award  
Consideration**

**\$188,101.00**

# Proposal

Proposal Of

TRIPLE CONSTRUCTION LLC  
5 EXECUTIVE DRIVE SUITE 3, HUDSON NH, 03051

to furnish and deliver all materials and to perform all work in accordance with the Contract of the State of New Hampshire, Department of Administrative Services, Division of Public Works for which proposals will be received until 2:00:00 PM, Prevailing Time on Wednesday, December 20, 2023. Said project being situated as follows:

NHSP-M ROOF REPLACEMENT - PLAZA DECK

Department of Administrative Services, Division of Public Works  
John O. Morton Building  
P. O. Box 483  
Concord, NH 03302-0483

Commissioner:

In accordance with the advertisement of the Department of Administrative Services, Division of Public Works inviting proposals for the project hereinbefore named and in conformity with the Plans and Specifications on file in the office of the Department of Administrative Services, Division of Public Works, I/WE hereby certify that I AM/WE ARE the only person, or persons, interested in this proposal as principals; that this proposal is made without collusion with any person, firm or corporation; that an examination has been made of the Plans, of the Standard Specifications, of the Standard Plans Book, of the Proposal, and applicable addendums, including but not restricted to the Special Attentions, Supplemental Specifications, and Special Provisions attached thereto, and also that an examination has been made of the site of the work; and I, or we, propose to furnish all necessary machinery, equipment, tools, labor and other means of construction, and to furnish all materials specified in the manner and at the time prescribed; and understand that the quantities of work as shown herein are approximate only and are subject to increase or decrease, and further understand that all quantities of work whether increased or decreased are to be performed at the following prices:

I acknowledge, understand, and accept these terms and conditions.

Yes  No

Signature Isl Mark Brockelman

## SIGN-STATE

It is further proposed:

To execute the Contract and begin work within 10 days from the date specified in the "Notice to Proceed" and to prosecute said work so as to complete the Project and its appurtenances on or before July 26, 2024.

To furnish a Contract Bond in the amount of 100 per cent of the Contract award, as security for the construction and completion of the Project and its appurtenances in accordance with the Plans, Specifications and Contract. The Contractor's attention is called to section 103.05 of the Standard Specifications which reads, in part, as follows: "Unless specifically waived in the Proposal, upon execution of the Contract, the successful Bidder shall furnish the Department a surety bond or bonds equal to the sum of the Contract amount. The form of the bonds(s) shall be acceptable to the Department and the bonding Company issuing the bond(s) shall be licensed to transact business in the State of New Hampshire, and ..."

To guarantee all of the work performed under this Contract to be done in accordance with the Specifications and in good and workmanlike manner, and to renew or repair any work which may be rejected, due to defective materials or workmanship, prior to final completion and acceptance of the project.

Enclosed herewith find certified check or bid bond in the amount of 5% OF THE BID TOTAL made payable to the "Treasurer, State of New Hampshire," as a proposal guarantee which it is understood will be forfeited in the event the Contract is not executed, if awarded by the Department to the undersigned.

I acknowledge, understand, and accept these terms and conditions.

Yes     No

Signature    Is/ Mark Brockelman





# CERTIFICATE OF PROPERTY INSURANCE

DATE (MM/DD/YYYY)

01/04/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

<b>PRODUCER</b> King Insurance Partners, LLC 2321 NW 41st St Ste B  Gainesville FL 32606	<b>CONTACT NAME:</b> Karen Case <b>PHONE (AC, No, Ext):</b> (888) 377-0420 <b>FAX (A/C, No):</b> <b>EMAIL ADDRESS:</b> Karen.Case@king-insurance.com <b>PRODUCER CUSTOMER ID:</b> 00020460													
	<table border="1"> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: Hanover Insurance Company</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Hanover Insurance Company		INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:
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INSURER A: Hanover Insurance Company														
INSURER B:														
INSURER C:														
INSURER D:														
INSURER E:														
INSURER F:														
<b>INSURED</b> State of NH Dept of Admin Svcs and all subs and all others employed on the Premise and Triple Construction LLC 5 Executive Dr Ste 3 Hudson NH 03051														

**COVERAGES**                      **CERTIFICATE NUMBER:** CP2411104310                      **REVISION NUMBER:**

**LOCATION OF PREMISES / DESCRIPTION OF PROPERTY (Attach ACORD 101, Additional Remarks Schedule, if more space is required)**

281 North State Street Concord, NH 03301. 81211E NHMSP

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	COVERED PROPERTY	LIMITS
	<input type="checkbox"/> PROPERTY CAUSES OF LOSS      DEDUCTIBLES <input type="checkbox"/> BASIC                      BUILDING <input type="checkbox"/> BROAD                      CONTENTS <input type="checkbox"/> SPECIAL <input type="checkbox"/> EARTHQUAKE <input type="checkbox"/> WIND <input type="checkbox"/> FLOOD				BUILDING PERSONAL PROPERTY BUSINESS INCOME EXTRA EXPENSE RENTAL VALUE BLANKET BUILDING BLANKET PERS PROP BLANKET BLDG & PP	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$
A	<input checked="" type="checkbox"/> INLAND MARINE CAUSES OF LOSS <input type="checkbox"/> NAMED PERILS <input checked="" type="checkbox"/> Special Form	TYPE OF POLICY Builders Risk  POLICY NUMBER IHV J2626374	01/08/2024	01/08/2025	<input checked="" type="checkbox"/> Building	\$ 188,101 \$ \$ \$
	<input type="checkbox"/> CRIME TYPE OF POLICY				<input checked="" type="checkbox"/> Deductible	\$ \$ 2,500 \$ \$
	<input type="checkbox"/> BOILER & MACHINERY / EQUIPMENT BREAKDOWN					\$ \$ \$ \$

**SPECIAL CONDITIONS / OTHER COVERAGES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**

281 North State St Concord Project 81211E-NHMSP.  
 The State of NH Department of Administrative Services, any and all subcontractors, and all others employed on the premises as additional named insureds.  
 This policy includes a waiver of subrogation when required by written contract.

**CERTIFICATE HOLDER****CANCELLATION**

State of New Hampshire c/o Department of Administrative Services  
 7 Hazen Drive, Room 250  
  
 Concord NH 03302

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

01/04/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. IF SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> King Insurance Partners, LLC 2321 NW 41st St Ste B  Gainesville FL 32606	<b>CONTACT NAME:</b> Karen Case <b>PHONE (AC, No, Ext):</b> (888) 377-0420 <b>FAX (AC, No):</b> <b>E-MAIL:</b> Karen.Case@king-insurance.com <b>ADDRESS:</b>
	<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A: Selective Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
<b>INSURED</b> State of New Hampshire Dept of Administrative Services c/o Triple Construction LLC 5 Executive Drive Ste 3 Hudson NH 03051	

**COVERAGES**      **CERTIFICATE NUMBER:** CL2411144937      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Owners & Contractors Protective  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			S 2635996	01/08/2024	01/08/2025	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 3,000,000 PRODUCTS - COM/PROP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/>						
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			N/A			PER STATUTE    OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Re: 281 North State St Concord #81211E

**CERTIFICATE HOLDER**

State of New Hampshire c/o Department of Administrative Services  
 7 Hazen Drive, Room 250  
  
 Concord NH 03302

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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# State of New Hampshire

## Department of State

### CERTIFICATE

I, David M. Scanlan, Secretary of State of the State of New Hampshire, do hereby certify that TRIPLE CONSTRUCTION, LLC is a New Hampshire Limited Liability Company registered to transact business in New Hampshire on January 07, 2016. I further certify that all fees and documents required by the Secretary of State's office have been received and is in good standing as far as this office is concerned.

Business ID: 737136

Certificate Number: 0006217041



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 26th day of April A.D. 2023.

A handwritten signature in black ink, appearing to read "David M. Scanlan".

David M. Scanlan  
Secretary of State

**CERTIFICATE OF AUTHORITY**

I, Gino Bernard, hereby certify that I am a Member or  
Manager of Triple Construction, LLC a limited liability  
company under

(Name of LLC)

RSA 304-C,

VOTED: That Kevin Cormier is duly  
authorized to enter

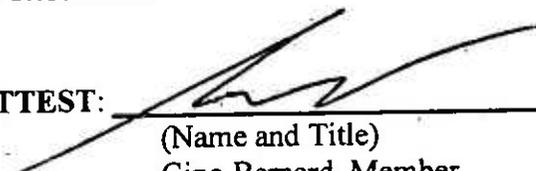
(Name and Title)

into contracts or agreements on behalf of Triple Construction, LLC with  
(Name of LLC)

the State of New Hampshire and any of its agencies or departments; and further, is authorized to  
execute any documents which may, in his judgment, be desirable or necessary to effect the  
purpose of this vote.

I further certify that it is understood that the State of New Hampshire will rely on this  
certificate as evidence that the person listed above currently occupies the position indicated and  
that they have full authority to bind the LLC and that this authorization **shall remain valid for  
thirty (30) days** from the date of this Corporate Resolution.

DATED: January 4, 2024

ATTEST: 

(Name and Title)

Gino Bernard, Member