



State of New Hampshire

DEPARTMENT OF ADMINISTRATIVE SERVICES

25 Capitol Street

Concord, New Hampshire 03301

(603) 271-3201 | Office@das.nh.gov

139

MAR 04 2026

JK

Charles M. Arlinghaus
Commissioner

Catherine A. Keane
Deputy Commissioner

Sheri L. Rockburn
Assistant Commissioner

January 12, 2026

Her Excellency, Governor Kelly A. Ayotte
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 K.J. Fisher and Sons LLC, (VC#165249), 95 Old Center Road, Deerfield, NH 03037, for a total price not to exceed \$85,911, for Project Number 81347R-B Drainage and Water Life Safety Improvements. This contract is effective upon Governor and Council approval through the completion of construction administration services, estimated to be July 24, 2026, unless extended in accordance with the contract terms. **100% Capital Funds.**
- 2) Further authorize that a contingency in the amount of \$20,000 be approved for unanticipated site expenses. **100% Capital Funds.**
- 3) Further authorize the amount of \$5,800 be approved for payment to the Department of Administrative Services, Division of Public Works Design and Construction (VC#311152), for project management and engineering services. **100% Capital Funds.**

Funding is available in account title N.H. Veterans Home as follows:

| | <u>FY 2026</u> |
|---|-------------------|
| 030-043-60080000-034-500162 L23:1XIII1-Drnge&Wtr Lfe Sfty | |
| 034-500162 – Contract | \$ 85,911 |
| 034-500162 – Contingency | \$ 20,000 |
| 034-500152 – DPW Fees | <u>\$ 5,800</u> |
| Project Total | \$ 111,711 |

EXPLANATION

Install sump pump in existing elevator lift pit for the Ledu Building on the Veterans Home Campus. Work includes forming a pit, installing a sump pump and drainage to nearest waste line, pump power, alarm system and panel integrated into the Building Management System.

Water intrusion has worsened over the years and is causing deterioration to the lift structure and components.

A public bid opening was held on October 22, 2025. Two (2) bid proposals were received and the contract was awarded to the lowest qualified bidder. The low bid is 7% under the Department estimate and within industry standards.

The agreement 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 agreement are on file at the Secretary of State's Office and the Department of Administrative Services – Division of Public Works Design and Construction.

The Department of Administrative Services has determined that the vendor is in good standing with the Secretary of State's Office, has secured the required levels of insurance, and has provided evidence of authority to execute and be bound by the contract.

Respectfully submitted,



Charles M. Arlinghaus,
Commissioner

| | |
|------------------------------------|---------------------|
| Department Estimate: | \$ 91,500.00 |
| Low Base Bid (without Alternates): | <u>\$ 85,911.00</u> |
| Under Estimate: | \$ 5,589.00 |



Division of Public Works

ABC Bid Data

TILTON
81347R
NON-FEDERAL

PROJECT: Tilton
STATE PROJECT NUMBER: 81347R
FED. PROJECT NUMBER: NON-FEDERAL
DATE BIDS OPEN: October 22, 2025, 2:00
SCOPE OF WORK: Sitewide Drainage & Water Life Safety Improvements
COMPLETION DATE: July 24, 2026
LOCATION: Belknap

Awarded To:

Amount: \$0.00

Award Date:

Certified by:

Director of Project Development

Summary of Bidders

| Contractor | Bid Amount | Rank |
|---|-------------|------|
| FISHER AND SONS LLC, K. J. 95 OLD CENTER ROAD, DEERFIELD NH 03037 | \$85,911.00 | A |
| TRIPLE CONSTRUCTION LLC 237 DANIEL WEBSTER HIGHWAY, MERRIMACK NH 03054 | \$98,450.00 | B |

BID AWARD

Award To: KJ Fisher and Sons, LLC

Contract Award: \$ 85,911.00

Negotiated: Yes/No?: NO

Alternates: Yes/No?: NO

Using Agency: NH Vets Home

Authorized By: [Signature]

Date: 11062025

Item 901: \$ 60,911.00 Item 906: \$ _____

Item 902: \$ 25,000.00 Item 907: \$ _____

Item 903: \$ _____ Item 908: \$ _____

Item 904: \$ _____ Item 909: \$ _____

Item 905: \$ _____ Item 910: \$ _____

BASE BID TOTAL: \$ 85,911.00

Alternate #1: \$ _____ Alternate #6: \$ _____

Alternate #2: \$ _____ Alternate #7: \$ _____

Alternate #3: \$ _____ Alternate #8: \$ _____

Alternate #4: \$ _____ Alternate #9: \$ _____

Alternate #5: \$ _____ Alternate #10: \$ _____

GRAND TOTAL: \$ 85,911.00



Division of Public Works

ABC Bid Data

TILTON
81347R
NON-FEDERAL

| Item No. | Description | Unit | Quantity | PS&E | | FISHER AND SONS LLC, K. J. 95 OLD CENTER ROAD DEERFIELD, NH 03037 | | TRIPLE CONSTRUCTION LLC 237 DANIEL WEBSTER HIGHWAY MERRIMACK, NH 03054 | |
|----------|-------------|------|----------|------------|-------|---|-------|--|-------|
| | | | | Unit Price | Total | Unit Price | Total | Unit Price | Total |

Items

| | | | | | | | | | |
|---------------------|---|----|-----------|-------------|--------------------|-------------|--------------------|-------------|--------------------|
| 901 | ALL WORK ASSOCIATED WITH THE INSTALLATION OF THE SUMP PUMP AS DETAILED IN THE CONTRACT DOCUMENTS. | U | 1.00 | \$66,500.00 | \$66,500.00 | \$60,911.00 | \$60,911.00 | \$73,450.00 | \$73,450.00 |
| 902 | UNFORESEEN CONDITIONS FOR ITEM 901 | \$ | 25,000.00 | \$1.00 | \$25,000.00 | \$1.00 | \$25,000.00 | \$1.00 | \$25,000.00 |
| Totals: | | | | | \$91,500.00 | | \$85,911.00 | | \$98,450.00 |
| Alt. Totals: | | | | | | | | | |
| Totals: | | | | | \$91,500.00 | | \$85,911.00 | | \$98,450.00 |



Division of Public Works

PS&E Comparison

TILTON
81347R
NON-FEDERAL

| Item No. | Description | Unit | Quantity | A-Bidder | | PS&E | | A-PS&E Difference |
|---------------|---|------|-----------|-------------|-------------|-------------|-------------|-------------------|
| | | | | Unit Price | Total | Unit Price | Total | |
| Items | | | | | | | | |
| 901 | ALL WORK ASSOCIATED WITH THE INSTALLATION OF THE SUMP PUMP AS DETAILED IN THE CONTRACT DOCUMENTS. | U | 1.00 | \$60,911.00 | \$60,911.00 | \$66,500.00 | \$66,500.00 | (\$5,589.00) |
| 902 | UNFORESEEN CONDITIONS FOR ITEM 901 | \$ | 25,000.00 | \$1.00 | \$25,000.00 | \$1.00 | \$25,000.00 | \$0.00 |
| Total: | | | | | \$85,911.00 | | \$91,500.00 | (\$5,589.00) |



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: **81347R** Tilton

Contractor Profile

| | |
|-----------------------|--|
| Firm | FISHER AND SONS LLC, K. J. |
| Contractor ID | 165249 |
| Address | 95 OLD CENTER ROAD DEERFIELD NH 03037 |
| Phone | (603)370-7574 |
| FAX | |
| E-Mail | kfishersons@gmail.com |
| Authorized Signature: | <i>Is/ Mark Brockelman</i> |

Bid Bond

Verified

| | |
|------------------|----------------------|
| Auth Code/Check# | SNH1002555051 |
|------------------|----------------------|

Receipt of Addenda

| Sequence | Date | |
|----------|------------|-----|
| 1 | 10/20/2025 | Yes |

**Department of Administrative Services, Division
of Public Works**

Total Bid for Award Consideration

Proposal

\$85,911.00

Contract Number: 81347R

Bid Opening Date: 22-Oct-2025

Contract Name: Tilton

Project Funding: State

Proposal For: 165249 - FISHER AND SONS LLC, K. J.

Items

| Seq# | Item # | Description | Unit | Quantity | Unit Price | Extended Price |
|------|--------|---|------|------------|-------------|----------------|
| 1 | 901 | ALL WORK ASSOCIATED WITH THE INSTALLATION OF THE SUMP PUMP AS DETAILED IN THE CONTRACT DOCUMENTS. | U | 1.000 | \$60,911.00 | \$60,911.00 |
| 2 | 902 | UNFORESEEN CONDITIONS FOR ITEM 901 | \$ | 25,000.000 | \$1.00 | \$25,000.00 |

Total for Category Items \$85,911.00

Total Bid for Award Consideration

\$85,911.00

Proposal

Proposal Of

FISHER AND SONS LLC, K. J.
95 OLD CENTER ROAD, DEERFIELD NH, 03037

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, October 22, 2025. Said project being situated as follows:

Sitewide Drainage & Water Life Safety Improvements

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 Is/ 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 24, 2026.

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



KJFISHE-01

KATHY1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/9/2025

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).

| | |
|---|--|
| PRODUCER The Davis Agency, LLC 24 Warren Street Concord, NH 03301 | CONTACT NAME: Kathleen Pettit |
| | PHONE (A/C, No, Ext): (603) 715-8684 FAX (A/C, No): E-MAIL ADDRESS: kathy@thedavisagency.com |
| INSURER(S) AFFORDING COVERAGE | |
| INSURER A : Acadia Insurance Company | NAIC # 31325 |
| INSURED | |
| K.J. Fisher & Sons, LLC 95 Old Center Road Deerfield, NH 03037 | |
| INSURER B : | |
| INSURER C : | |
| INSURER D : | |
| INSURER E : | |
| INSURER F : | |

COVERAGES **CERTIFICATE NUMBER:** **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 INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|----------|---|-----------|----------|---------------|-------------------------|-------------------------|---|
| A | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC <input type="checkbox"/> OTHER: | X | | CPA5293889-18 | 5/15/2025 | 5/15/2026 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 |
| A | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY | | | CAA5293890-18 | 5/15/2025 | 5/15/2026 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ |
| A | <input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0 | | | CUA5294652-18 | 5/15/2025 | 5/15/2026 | EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 Prod./Comp. Ops \$ 5,000,000 |
| A | <input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below | | N/A | WPA5293891-18 | 5/15/2025 | 5/15/2026 | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
**Workers Compensation - 3A States: NH, MA, ME.

RE: Statewide Drainage & Water Life Safety Improvements - NH Veterans Home (81347R, Contract B) - 139 Winter Street, Tilton, NH. It is agreed and understood that The State of New Hampshire, its agencies and its agents and employees are included as additional insured on General Liability for ongoing operations 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  |



KJFISHE-01

KATHY1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/9/2025

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| | |
|--|---|
| PRODUCER The Davis Agency, LLC 24 Warren Street Concord, NH 03301 | CONTACT NAME: Kathleen Pettit |
| | PHONE (A/C, No, Ext): (603) 715-8684 FAX (A/C, No): |
| | E-MAIL ADDRESS: kathy@thedavisagency.com |
| | INSURER(S) AFFORDING COVERAGE |
| | INSURER A: Acadia Insurance Company NAIC # 31325 |
| INSURED State of New Hampshire, c/o Department of Administrative Services 7 Hazen Drive, Room 250 Concord, NH 03302 | INSURER B: |
| | INSURER C: |
| | INSURER D: |
| | INSURER E: |
| | INSURER F: |

COVERAGES **CERTIFICATE NUMBER:** **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 INSD | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|----------|--|-----------|----------|---------------|-------------------------|-------------------------|--|
| A | COMMERCIAL GENERAL LIABILITY | X | | OCP5671813-10 | 12/3/2025 | 12/3/2026 | EACH OCCURRENCE \$ 2,000,000 |
| | <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ |
| | <input checked="" type="checkbox"/> Owners & Contractors <input checked="" type="checkbox"/> Protective Liab. | | | | | | MED EXP (Any one person) \$ |
| | GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER: | | | | | | PERSONAL & ADV INJURY \$ |
| | | | | | | | GENERAL AGGREGATE \$ 3,000,000 |
| | | | | | | | PRODUCTS - COMPI/OP AGG \$ |
| | | | | | | | \$ |
| | AUTOMOBILE LIABILITY | | | | | | COMBINED SINGLE LIMIT (Ea accident) \$ |
| | <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY | | | | | | BODILY INJURY (Per person) \$ |
| | | | | | | | BODILY INJURY (Per accident) \$ |
| | | | | | | | PROPERTY DAMAGE (Per accident) \$ |
| | | | | | | | \$ |
| | UMBRELLA LIAB | | | | | | EACH OCCURRENCE \$ |
| | EXCESS LIAB | | | | | | AGGREGATE \$ |
| | DED | | | | | | \$ |
| | RETENTION \$ | | | | | | \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY | | | | | | PER STATUTE OTH-ER |
| | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N N/A | | | | | | E.L. EACH ACCIDENT \$ |
| | If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | 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: Drainage & Water Life Safety Improvements (81347R, Contract B) - 139 Winter Street, Tilton, NH.

| | |
|--|---|
| CERTIFICATE HOLDER State of New Hampshire c/o Department of Administrative Services 7 Hazen Dirve, 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  |
|--|---|

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 K.J. FISHER AND SONS L.L.C. is a New Hampshire Limited Liability Company registered to transact business in New Hampshire on March 18, 2004. 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: 469364

Certificate Number: 0007197342



IN TESTIMONY WHEREOF,

I hereto set my hand and cause to be affixed
the Seal of the State of New Hampshire,
this 11th day of June A.D. 2025.

A handwritten signature in black ink, appearing to read "D. Scanlan", is written over a faint circular stamp.

David M. Scanlan
Secretary of State

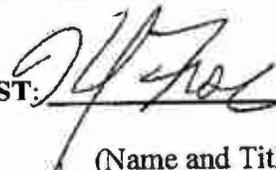
CERTIFICATE OF AUTHORITY

I, Kevin Fisher, hereby certify that I am a Member or
Manager of K J Fisher and Sons, LLC a limited liability
company under RSA 304-C.

VOTED: That Barbara A Fisher, Managing Member, is duly authorized to enter
into contracts or agreements on behalf of K J Fisher and Sons, LLC with
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: 12/9/2025

ATTEST:  _____ Member
(Name and Title)