

1.) CORPORATION NAME:

EMCOR Services CES, Inc.

DUE DATE: **8/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CENTER 16TH FL
1111 EAST MAIN STREET**

SCC ID NO: **F1870619**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2800 CRYSTAL DRIVE

CITY/ST/ZIP: ARLINGTON, VA 22202

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: LEARA DORY TITLE: PRESIDENT ADDRESS: 2800 CRYSTAL DRIVE CITY/ST/ZIP/CO: ARLINGTON, VA 22202</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: ANTHONY TRIANO TITLE: VICE PRESIDENT ADDRESS: 301 MERRITT SEVEN 6TH FLOOR CITY/ST/ZIP/CO: NORWALK, CT 06851</p>	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
<p>NAME: MAXINE MAURICIO TITLE: VICE PRESIDENT ADDRESS: 301 MERRITT SEVEN 6TH FLOOR CITY/ST/ZIP/CO: NORWALK, CT 06851</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: DOUGLAS MYERS TITLE: VICE PRESIDENT ADDRESS: 301 MERRITT SEVEN 6TH FLOOR CITY/ST/ZIP/CO: NORWALK, CT 06851</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: STEVEN NICKLAS TITLE: VICE PRESIDENT ADDRESS: 2800 CRYSTAL DRIVE CITY/ST/ZIP/CO: ARLINGTON, VA 22202</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
<p>NAME: JEFF GADDY TITLE: TREASURER ADDRESS: 2800 CRYSTAL DRIVE CITY/ST/ZIP/CO: ARLINGTON, VA 22202</p>	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR

NAME:	MAXINE MAURICIO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	301 MERRITT SEVEN		
	6TH FLOOR		
CITY/ST/ZIP/CO:	NORWALK, CT 06851		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ MAXINE MAURICIO</u>	<u>MAXINE MAURICIO, VICE</u>	<u>8/6/2014</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRESIDENT	DATE
	PRINTED NAME AND CORPORATE TITLE	

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.