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## State of Rhode Island and Providence Plantations Department of State - Business Services Division

1. Corporate ID No. 000830040		rporation r Building Company, Inc	•			
3. Street Address Principal Business Office 9 High Meadow Road			City Little Compton	State <b>RI</b>	<sup>Zip</sup> <b>02720</b>	
4. NAICS Code 53		5. State of Incorporation Rhode Island		·	<del></del>	
President Name Richard R. Chartier	lop, improve, ren		ACHMENT)   FILL IN Vice President Name	N SPACES BEFORE U	SING ATTACHMENT	
Street Address 9 High Meadow Road			Street Address			
Cuy Little Compton	State RI	Zip <b>02720</b>	City	State	Zip	
Secretary Name Richard R. Chartier			Treasurer Name Richard R. Chartier			
Street Address 9 High Meadow Road			Street Address 9 High Meadow Road			
City Little Compton	State RI	<sup>Zip</sup> <b>02720</b>	City Little Compton	State RI	Zip 02720	
Director Name Richard R. Chartier Street Address 9 High Meadow Road City State Zip			Director Name   Street Address   State   Zip			
Little Compton Director Name	RI	02720	Director Name	Sidie	Zip	
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT)			10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT)  ISSUED SHARES - THIS SECTION MUST BE COMPLETED			
. SHARES AUTHORIZE	This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of			Number of Shares   Class/Series   Par Value   200 common shares \$.01 par value		
This information is currer State. Changes require ar	additional filing.					
This information is currer State. Changes require ar	n additional filing.					
This information is currer state. Changes require an instruction sheet.  1. This report must be excustee, this report must be excusted.	ecuted on behalf of executed on beha	of the corporation by an auth	receiver or trustee.			
This information is currer state. Changes require an instruction sheet.  1. This report must be exustee, this report must be	ecuted on behalf of executed on beha	of the corporation by an auth	receiver or trustee.  Iding any accompanying sch	hedules and statements,		
This information is currer state. Changes require an instruction sheet.  1. This report must be excustee, this report must be excusted.	ecuted on behalf of executed on beha	of the corporation by an auth	receiver or trustee.  Iding any accompanying sch	hedules and statements,		
information is currer. Changes require ar uction sheet.  This report must be exe, this report must be exact.	ecuted on behalf of executed on beha	of the corporation by an auth	receiver or trustee.  Iding any accompanying sch			

MAIL TO:

Title

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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