| State of Rhode Island and Providence Plantations Fee Office of the Secretary of State | | | | | | | |
|--|--|-----------------------------|-----------------------------|--|--|--|--|
| Division Of Business Services | | | | | | | |
| | 148 W. River S | | | | | | |
| | Providence RI 0290 | | | | | | |
| HOPE | (401) 222-30 | ÷Ū | | | | | |
| Foreign Business Corpora | ation | | | | | | |
| Annual Report | | | | | | | |
| Filing Period: January 1 - March 1 | | | | | | | |
| In accordance with R.I.G.L. 7-1.2- annual report within thirty (30) day | | - | 1 | | | | |
| (c&d)) is subject to a penalty fee | | IW (N.I.G.L. 7-1.2-1301 | | | | | |
| | | | | | | | |
| ANNUAL REPORT YEAR: 2020 | <u></u> | | | | | | |
| 1. Corporate ID No. 00004 | 5518 | | | | | | |
| 2 Name of Corneration DDE | | INC | | | | | |
| 2. Name of Corporation <u>PRE-</u> | PAID LEGAL SERVICES, | | | | | | |
| 3. Street Address Principal Bus | siness Office: | | | | | | |
| No. and Street: ONE PRE | -PAID WAY | | | | | | |
| City or Town: <u>ADA</u> | State: | <u>DK</u> Zip: <u>74820</u> | Country: <u>USA</u> | | | | |
| 4. Business Phone No. | | | | | | | |
| 4. Business Phone No. | | | | | | | |
| <u>580-436-1234</u> | | | | | | | |
| 5. State of Incorporation | | | | | | | |
| | | | | | | | |
| State: <u>OK</u> | | | | | | | |
| | ARTICLE III | | | | | | |
| | | | | | | | |
| Enter the six digit NAICS Code the list of codes here. More inform | | | / the entity. Download | | | | |
| | | | | | | | |
| <u>541190</u> | | | | | | | |
| 6. Brief Description of the Cha | racter of Business Conducte | in Rhode Island | | | | | |
| | | | | | | | |
| MARKETING OF PREPAID | LEGAL AND IDENTITY T | JEFT PRODUCTS | | | | | |
| | | | | | | | |
| 7. Names and Addresses of the | e Officers and Directors: | | | | | | |
| All officers and directors mu | All officers and directors must be listed. | | | | | | |
| | | | | | | | |
| Title | Individual Name | Add | Iress | | | | |
| | First, Middle, Last, Suffix | Address, City or Town, | State, Zip Code, Country | | | | |
| SECRETARY | KATHLEEN S. PINSON | | JNTY ROAD 3588 74820 USA | | | | |

JEFF BELL

10420 NE 47TH PLACE

CEO

| | | KIRKLAND, WA 98033 USA | |
|----------------|--------------------|---|--|
| CFO | STEVE WILLIAMSON | 16432 COUNTY ROAD 3590 ADA, OK 74820 USA | |
| CONTROLLER | TWILA SHELTON | 21842 STATE HIGHWAY 1 EAST ADA, OK 74820 USA | |
| VICE PRESIDENT | KERI NORRIS | 1628 AUGUSTA DRIVE ADA, OK 74820 USA | |
| DIRECTOR | JEFF BELL | 10420 NE 47TH PLACE KIRKLAND, WA 98033 USA | |
| DIRECTOR | KERI NORRIS | 1628 AUGUSTA DRIVE ADA, OK 74820 USA | |
| DIRECTOR | KATHLEEN S. PINSON | 14591 CR 3588 ADA, OK 74820 USA | |
| DIRECTOR | STEVE WILLIAMSON | 16432 CR 3590 ADA, OK 74820 USA | |

8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per Share | Total Authorized Shares Number of Shares | Total Issued and Outstanding <i>Num of</i> <i>Shares</i> |
|----------------|-----------------|---------------------|--|--|
| CWP | | \$0.0100 | 100,000,000.00 | 100 |
| PWP | | \$1.0000 | 900,000.00 | 0 |

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 28 Day of February, 2020 at 11:17:19 AM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

By KATHLEEN S. PINSON

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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