

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615 401.222.3040

(<u> </u>			
1. Corporate ID No.	2. Name of Corporation				
105750	Law Offices	s of Joseph T.	Nottie, III, Ind	2.	
3. Street Address Principal Business ()ffice		City	State	Zip
77 Rolfe Squa	re		Cranston	RI	02910
4. Business Phone No.		5. State of Incorporation		•	
401-785-4500		RHODE ISL	AND		
6. Brief Description of the Character	of Business Conducted in R		211(1)		
PROVIDING LEG. 7. NAMES AND ADDRESSES President Name	AL SERVICES OF THE OFFICERS	("X" BOX FOR ATTA	CHMENT) . FILL IN SI	PACES BEFORE USING	ATTACHMENTS
JOSEPH T. NOTTIE III			N/A		
Street Address			Street Address		
77 Rolfe Squar	re				
City	State	Zip	City	State	Ζip
- Cranston	RI	02910			-
Secretary Name	. .	***************************************	Treasurer Name	**************************	
N/A			N/A		
Street Address			Street Address		
	•				
City	State	Zíp	City	State	Zφ
	•				}
8. NAMES AND ADDRESSES	OF THE DIRECTOR	Sea ("X" BOX FOR ATT	A <i>chment).</i> ∏ fill in	SPACES BEFORE USIN	G ATTACHMENTS
Director Name			Director Name		
N/A			N/A		
Street Address			Street Address		
				•	
City	State	Zip	City	State	Zip
		1			1 *
Director Name	.J	.J	Director Name		
N/A			N/A		
Street Address			Street Address		<u> </u>
5,700,1144,025			the contrastructure of		
City	State	Zip	City	State	Ztp
] 1			1 '
9: SHARES AUTHORIZED: (Sys roy rob attent	 <i>HMB</i> ************************************	Lead Strappe receipts	("X" BOX FOR ATTAC	I HWFNE\∏
AUTHORIZED SHARES			CATACATA CANADA	TION MUST BE COMPLETED	AND ADDRESS TO CONTRACT THE PARTY OF THE PAR
	Class (Contac	Day Materia			Par Value
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par vaiue
100 NO PAR VALUE			100	COMMONES	NETHAR Value
			THIS SEC	INI MAA.	
		· · · · · · · · · · · · · · · · · · ·	1		
This report must be executed	on behalf of the corp	oration by an authorize	d representative. If the co	orporation is in the hand	ls of a receiver or trustee,
this report must be executed	on behalf of the corp	pration by the receiver	or trustee.		
	1 - Մերագրերագր համա				

JAN 25 2008	Under penalty of perjury, I declare and affirm that I have examined this repincluding any accompanying schedules and statements, and that all statements	ort,
File Date	contained herein are true and correct. 1/24/6 D	
Chief to the second sec	Print or Type Name	7
THE RESERVED LIKE TATH USE ONLY BY MED	Title Form 630 Rev. 12/06	