

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

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. Corporate ID No	2. Name of Corpo		- (
72253 Street Address Principal		of Series Ly	City	State	Zip
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Business Phone No.	$\overline{m} = \frac{2\mu_{\infty}}{2}$	5. State of Incorporation	-		
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ily Charles	State	Zip C 274	Care -	Jinace	
ocretary Name		1.000.10	Treasurer Name		
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NAMES AND ADI	DRESSES OF THE DIRE	CTORS: ("X" BOX FOR AT	TACHMENT) 📗 FILL II	N SPACES BEFORE USIN	IG ATTACHMENTS
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			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
This information is	currently of record in th	ne Office of the Secretary of	Number of Shares	Class/Series	Par Value
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of					
instruction sheet.	, Ç				
				<u> </u>	<u> </u>
This report must be	executed on behalf of the	ne corporation by an authoria	ed representative. If the	corporation is in the han-	ds of a receiver or trustee
his report must be	executed on behalf of th	e corporation by the receiver	or trustee.		
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	//:	10	Under penalty of	perjury, I declare and affirm	n that I have examined this re
_		<u>' / </u>	including any acc	companying schedules and s	statements, and that all states
	FILED			are true/and/ch/rect.	21. da
Pile Date			YIAT 9	/Hallim	1-21-10
JA	AN 22 2010		Signature	,,,,,,,,	Date
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