Filing and License Fee: \$310.00 minimum

ID	Number:		



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
148 W. River Street Providence, Rhode Island 02904-2615

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY

COI	porat	nt to the provision ion hereby applie wing statement:	ns of Section es for a Certif	7-1.2-1405 (ficate of Auth	of the General lority to transact	Laws t busii	s of Rho iness in	ode Island the State	d, 1956 e of Rho	3, as ar ode Isla	nended, ind, and	the under for that pu	rsigned forei urpose subm	gn`
1.	The i	name of the corpo	oration is	eneficial inv	estment Service	ces ir	nc.							
2.	It is i	ncorporated unde	r the laws of	Utah									.	
3.	The	name, if different,	which it elec	ts to use in R	hode Island is:									
	(a)	If the name of "incorporated," of above corporate	or "limited," c	or an abbrevia	ation thereof, th									
	(b)	If the corporate qualify and tran application:												
4.	The	date of its incorpo	ration is N	farch 12, 200)4	8	and the	period of	f its dur	ation is	perpet	ual		_
5.	The a	address of its prin	cipal office in	n the state or	country under th	he lav	ws of wt	hich it is ir	ncorpor	ated is				
1	50 S	ocial Hall Avenu	e Ste. 500	Salt Lake Cit	y, UT 84136									13
6.	The a	address of its pro	posed registe	ered office in F	Rhode Island is									
		Macketick (City/Tor	wn)	, R	(I <u>02888</u> (Zip Code)	_ a	and the	name of it	ts prop	osed re	gistered	agent in F	Rhode Island	at
	that :	address is	Corp	ocation	Service 1	Or	m Aa	nii						
				<u> </u>	(Nar	me of	f Agent)	J						
7.	The	ourpose or purpos	ses which it p	roposes to pu	ursue in the tran	nsacti	ion of b	usiness in	Rhode	e Island	are:			
	Sec	urities, Financial	Planning, li	nvestment A	dvice									
		, ,												_
8.		he names and re f which it is incom			lirectors (optiona	nal uni	nless dir	ectors are	e requir	ed und	er the lav	ws of the s	itate or coun	ry
	5	4	Charles Fun	<u>Name</u>	MAE	-7 50 Co.	حالا احاد		- 04 - 5	<u>Addres</u>	_	. UT 04		
		ii ecroi	Michael Mat									ity, UT 84		
			snaron weii	nie								ity, UT 84		_
	D	irector		M	4R 08 2010)								_
	m No.	. 150 12/05		BY	- 113235	-	11:05	5						

	state or country of which it is incorp			Address
				<u> 700/655</u>
	Co- Descident			
	-			
5	Corretory			
9. Th	ne aggregate number of shares which nd series, if any, within a class, is:	n it has authority to is	ssue, itemized by classes,	par value of shares, shares without par value
50	Number of Shares	<u>Class</u> ommon	<u>Series</u>	Par Value or Statement that Shares are without Par Value \$1.00
_				
10. (a)) An estimate of the value of all	property to be own	ned by the corporation for	or the following year, wherever located, is
(b)) An estimate of the value of the	corporation's prope	rty to be located within	Rhode Island during the following year is
(c)	located within this state during the	following year bears	to the value of all property	value of the property of the corporation to be y of the corporation to be owned during the nultiply by 100 to obtain the percentage].
11. (a)	An estimate of the gross amounts 586, 715	nt of business to be	e transacted by the co	rporation during the following year is
(b)	An estimate of the gross amour Island during the following year is	nt of business to be	transacted by the corporat	tion at or from places of business in Rhode
(c)	corporation at or from places of bu	isiness in this state d uring the following ye	luring the following vear b	mount of business to be transacted by the ears to the gross amount thereof which will vide (b) by (a) and multiply by 100 to obtain
12. Th	is application is accompanied by a co which it is incorporated.	ertificate of Good Sta	anding issued by the prope	er officer of the state or country under the laws
13. Thi tha	is Application for Certificate of Autho an the 90 th day after the date of this fi	rity shall be effective	upon filing unless a spec	ified date is provided which shall be no later
Date:	2-26-10	e	examined this Application and accompanying at contained herein are true	ury, I declare and affirm that I have on for Certificate of Authority, including ttachments, and that all statements e and correct. thorized Officer of the Corporation
		-	Charles F. Fu Type or Prin	t Name of Authorized Officer



Utah Department of Commerce

Division of Corporations & Commercial Code

160 East 300 South, 2nd Floor, PO Box 146705 Salt Lake City, UT 84114-6705 Service Center: (801) 530-4849

Toll Free: (877) 526-3994 Utah Residents

Fax: (801) 530-6438

Web Site: http://www.commerce.utah.gov

02/23/2010 5600903-014202232010-3386017

CERTIFICATE OF EXISTENCE

Registration Number:

5600903-0142

Business Name:

BENEFICIAL INVESTMENT SERVICES, INC.

Hathy Bury

Registered Date:

March 12, 2004

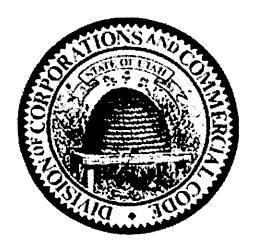
Entity Type:

Corporation - Domestic - Profit

Current Status:

Good Standing

The Division of Corporations and Commercial Code of the State of Utah, custodian of the records of business registrations, certifies that the business entity on this certificate is authorized to transact business and was duly registered under the laws of the State of Utah. The Division also certifies that this entity has paid all fees and penalties owed to this state; its most recent annual report has been filed by the Division (unless Delinquent); and, that Articles of Dissolution have not been filed.



Kathy Berg Director

Division of Corporations and Commercial Code