

Filing Fee: \$150.00

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

LIMITED LIABILITY COMPANY

APPLICATION FOR REGISTRATION

2010 JUN 7 AM 10:20

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1. The name of the limited liability company is: Moser Pilon Nelson, Architects, LLC

2. The name, if different, under which it proposes to register and transact business in Rhode Island is:

3. The limited liability company is organized under the laws of Connecticut

4. The date of its organization is December 27, 1996

5. The period of duration of the limited liability company is (if perpetual, so state) 13 years, 5 months, perpetual

6. The address of the limited liability company's resident agent in Rhode Island is: 222 Jefferson Boulevard, Suite 200 Warwick, RI 02888

and the name of the resident agent at such address is Registered Agent Solutions, Inc.

7. The secretary of state is appointed the agent of the foreign limited liability company for service of process if at any time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.

8. The address of any office required to be maintained in the state or other jurisdiction under the laws of which the limited liability company is organized is: 30 Jordan Lane, Wethersfield CT 06109

9. The mailing address for the limited liability company is: 30 Jordan Lane, Wethersfield CT 06109

FILED

JUN 07 2010

BY [Signature] 119706

10. Management of the Limited Liability Company:

A. The limited liability company is to be managed  by its members. *(If you have checked this box, go to item no. 11.)*

or

B. The limited liability company is to be managed  by one (1) or more managers. *(If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name and address of each manager.)*

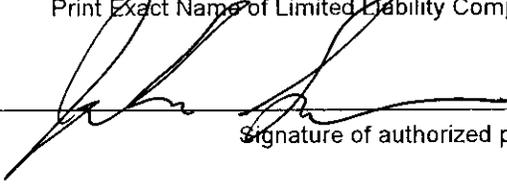
<u>Manager</u>	<u>Address</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

11. This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or other authorized officer of the jurisdiction under which the foreign limited liability company was organized.

Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct.

Date: June 4, 2010

Moser Pilon Nelson, Architects, LLC  
Print Exact Name of Limited Liability Company Making Application

By   
Signature of authorized person

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,  
DO HEREBY CERTIFY, that articles of organization for

MOSER PILON NELSON, ARCHITECTS, LLC

a domestic limited liability company, were filed in this office on December 27, 1996.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such  
limited liability company is in existence.



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Secretary of the State

Date Issued: May 18, 2010



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Department of Business Regulation  
DIVISION OF DESIGN PROFESSIONALS  
1511 Pontiac Avenue, Bldg. 68-2  
Cranston, RI 02920  
(401) 462-9530 Fax: (401) 462-9532 www.bdp.state.ri.us

15 April 2010

MOSER PILON NELSON/ARCHITECTS, LLC  
30 JORDAN LANE  
WETHERSFIELD, CT 06109

Dear Sir/Madam:

Your request for Certificate of Authorization has been reviewed and approved by the Rhode Island Board of Examination and Registration of Architects (the "Board"). In accordance with the procedures adopted by this Board, **you are requested to provide the following information.**

The document requested by the Board is a **CERTIFICATE OF GOOD STANDING**, not **Certificate of Authority**, issued by the Rhode Island Secretary of State's Office, indicating that at the present time your corporate entity is in good standing insofar as registration procedures required by the Secretary of State's Office. The Board is requesting that the **original certificate of such notice be provided within 60 days. A copy of this letter must accompany your certificate of authority application, along with the required fee for a certificate of good standing, to the Secretary of State's office.**

You can contact the Rhode Island Secretary of State's Office by calling (401) 222-3040. Ask for corporations and explain you need the necessary papers to become registered in the State of Rhode Island.

**Upon receipt** of this **CERTIFICATE OF GOOD STANDING**, the Board will issue your Certificate of Authorization. If you have any questions, please feel free to contact this Board.

**Please be advised that until receipt of this CERTIFICATE OF GOOD STANDING, your application is considered incomplete and you are not authorized to practice architecture in the state of Rhode Island.**

Very truly yours,

**BOARD OF EXAMINATION AND  
REGISTRATION OF ARCHITECTS**

*Barbara Feibelman*

Barbara Feibelman, AIA  
Secretary

BF/dmb



# State of Rhode Island and Providence Plantations

**A. Ralph Mollis**

*Secretary of State*

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

I, A. RALPH MOLLIS, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly  
executed in accordance with the provisions of Title 7 of the General Laws  
of Rhode Island, as amended, has been filed in this office on this day:

A handwritten signature in black ink that reads "A. Ralph Mollis".

A. RALPH MOLLIS

*Secretary of State*

