Filing and License Fee: \$310.00 minimum



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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

BUSINESS CORPORATION

APPLICATION FOR CERTIFICATE OF AUTHORITY

SECSETARY OF STATE CO. STATE AND STATE

Pursuant to the provisions of Section 7-1.2-1405 of the General Laws of Rhode Island, 1956, as amended, the undersigned foreign corporation hereby applies for a Certificate of Authority to transact business in the State of Rhode Island, and for that purpose submits the following statement:

1.	The	The name of the corporation isEARL SWENSSON ASSOCIATES, INC.							
2.		It is incorporated under the laws of							
3.	The	name,	if different, which it elects to use in Rhode Isl						
	(a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation". "compar "incorporated", or "limited" or an abbreviation thereof, then list the name of the corporation with the addition of one of above corporate endings for use in Rhode Island:								
	(b) If the corporate name is not available in Rhode Island, then set forth below the fictitious name under which the corporation of qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with the application:								
4.	The	date of	its incorporation is 5 30 197.	and the period of its duration is PERPETUAL					
5.	2400 MECT END AVE CHITE 4000 NACHUM I TO THE COLOR								
6.	The	The address of its proposed registered office in Rhode Island is							
				(Street Address, not P.O. Box)					
	WARWICK (City/Town) RI (City/Town) RI (Zip Code) NATIONAL REGISTERED ACENTS INC.								
	(City/Town) (ZID Code)								
	that address is NATIONAL REGISTERED AGENTS, INC. (Name of Agent)								
7.		The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: ARCHITECTURE							
8.	(a) The names and respective addresses of its directors (optional unless directors are required under the laws of the state or country of which it is incorporated).								
			<u>Name</u>	Address					
	Direc	ctor	JAMES TODD ROBINSON	2100 WEST END AVE, SUITE 1200 NASHVILLE, TN 37203					
	Direc	ctor	RICHARD L. MILLER	2100 WEST END AVE, SUITE 1200 NASHVILLE, TN 37203					
	Direc	Director							
	Direc	Director FILED							
		Porm No. 150 Revised: 06/11 By 15499 DS 11: (0)							
				NO 11.10					

		<u> 1</u>	<u>Name</u>		Address			
	President	RICHARD L. MILLER		2100 WEST	2100 WEST END AVE, SUITE 1200 NASHVILLE, TN 3720			
	Vice President				2100 WEST END AVE, SUITE 1200 NASHVILLE, TN 3720 2100 WEST END AVE, SUITE 1200 NASHVILLE, TN 3720			
	Treasurer	JAMES TODD ROBINSON JAMES TODD ROBINSON		2100 WEST				
	Secretary			2100 ₩231	END AVE, SUITE 1200 NASHVILLE, IN 3720			
9.	The aggregate number of shares which it has authority to issue; itemized by classes, par value of shares, shares without par value and series, if any, within a class, is:							
	Number of SI	<u>nares</u>	Class	<u>Series</u>	Par Value or Statement that Shares are without Par Value			
	300,000				\$0.01			
10.	(a) \$ 3,200,000 following year	r, wherever located.	= An estimate of	of the value of all prop	perty to be owned by the corporation for the			
	(b) \$ 0		= An estimate o	of the value of the corn	oration's property to be located within Rhode			
	Island during	the following year.		in the value of the corp	oration's property to be located within Rhode			
	(c) 0 the corporation be owned during the corporation of the corporati	in to de located within	following vear bears to	ion that the estimated value of the property of the value of all property of the corporation to tiply by 100 to obtain the percentage)				
11.	(a) \$0000,000		= An estimate of the gross amount of business to be transacted by the corporation					
	during the foll	owing year.						
	(b) \$\frac{0}{\text{or from places}}	of business in Rhode	= An estimate of the gross amount of business to be transacted by the corporation at node Island during the following year.					
	(c) 0 % = An estimate, expressed as a percentage, of the proportion that the gross amount of business to be transacted by the corporation at or from places of business in this state during the following year bears to the gross amount thereof which will be transacted by the corporation during the following year. {divide (b) by (a) and multiply by 100 to obtain the percentage}							
12.	This application is accompanied by a certificate of Good Standing issued by the proper officer of the state or country under the laws of which it is incorporated.							
13.	This Application for Certificate of Authority shall be effective upon filing unless a specified date is provided which shall be no later							
	than the 90th day after the date of this filing UPON FILING							
			Un An	der penalty of perjury, l	declare and affirm that I have examined this of Authority, including any accompanying			
Date	s:	· .	, au	achments, and that at	statements contained herein are true and			
Date	::	·.	, au	ect.	statements contained herein are true and statements contained herein are true and thorized Officer of the Corporation			

Type or Print Name of Authorized Officer



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

23 August 2011

EARL SWENSSON ASSOCIATES, INC. 2100 W END AVE STE 1200 NASHVILLE, TX 37203

Dear Sir/Madam:

Your request for Certificate of Authorization (COA) 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

Christian J. Ladds, AIA Secretary

CJL/dmb



STATE OF TENNESSEE Tre Hargett, Secretary of State

Division of Business Services

William R. Snodgrass Tower 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

EARL SWENSSON ASSOCIATES, INC.

#1200 2100 WEST END AVE NASHVILLE, TN 37203

Request Type: Certificate of Existence/Authorization

Request #:

0049709

Issuance Date: 10/20/2011

Copies Requested:

Document Receipt

Receipt #: 556083

Filing Fee:

\$20.00

October 20, 2011

Payment-Cash - EARL SWENSSON ASSOCIATES, INC., NASHVILLE, TN

\$20.00

Regarding:

EARL SWENSSON ASSOCIATES, INC.

Filing Type:

Corporation For-Profit - Domestic

Formation/Qualification Date: 05/30/1973

Status:

Active

Duration Term: Perpetual

Control #:

31229

Date Formed:

05/30/1973

Formation Locale: Davidson County

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

EARL SWENSSON ASSOCIATES, INC.

- * is a Corporation duly incorporated under the law of this State with a date of incorporation and duration as given above:
- * has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- * has filed the most recent corporation annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Nichole Hambrick

Phone 615-741-6488 * Fax (615) 741-7310 * Website: http://tnbear.tn.gov/



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. RALPH MOLLIS

A. Japa 1. eeio

Secretary of State

