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

FILED

By 194145

BUSINESS CORPORATION

APR 29 2013 11:49

APPLICATION FOR CERTIFICATE OF AUTHORITY

Kmc

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:

the	following statement:						
1.	The name of the corporation is H. THOMAS ASSOCIATES, Lvc.						
2.	It is incorporated under the laws of Commonwearth of MASSACHUSE HS						
3. The name, if different, which it elects to use in Rhode Island is:							
	(a) If the name of the corporation in its jurisdiction of incorporation does not contain the word "corporation", "company", "incorporated", or "limited" or an abbreviation thereof, then list the name of the corporation with the addition of one of the 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 will qualify and transact business in Rhode Island as stated in the "Fictitious Business Name Statement" to be filed with this application:						
4.	The date of its incorporation is						
5.	The address of its principal office is 7 FORBES STREET, WESTBOROUGH, MAYO1581-2009						
6.	The address of its proposed registered office in Rhode Island is 222 Tefferson Blvd, Suite 260 (Street Address, not P.O. Box)						
	(City/Town), RI O2888 and the name of its proposed registered agent in Rhode Island at						
	that address is Corporation Service Company == (Name of Agent)						
7.	The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:						
	VACUUM Removal of Look gravel, dir, AND Rust from compercise						
	FLAT FOOFS AS A SUBCONTRACTOR						
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> <u>Address</u>						
	Director BRIAN W. THOMAS, SR 7 FORBES STREET, WESTBOROUGH, MA O1581-20						
	Director						
	Director						
	Director						

Form No. 150 Revised: 06/11

	•	hich it is incorporated). Name			Address			
Dec	esident	BRIAN W. THOMAS, SR		7 FORBES STREET, WESTBOROUGH, MADONS 1.200				
	e President							
	easurer			7 Farbes Street, WestBarough, MA015812005				
	cretary			7 Frage	7 Forses Street, Westerry h MA 01581-2			
00.	or Ottar y	OUSHIE TO	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>	,	Ures, occas, w.,		
	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 Share		<u>Class</u>		Par Value or Statement that Series Shares are without Par Value			
	100		CNP			0.00	<u> </u>	
10. (a)		ooo.	_ = An estimate of th	e value of all prope	erty to be ov	wned by the corpora	ation for the	
(b)	(b) \$ = An estimate of the value of the corporation's property to be located within Rhode							
	Island during the	following year.						
(c)		o be located within t	expressed as a percent his state during the folk wherever located. {divide	owing year bears to	the value of	all property of the co	orporation to	
11. (a)	\$ 310,000	· <u>«</u>	= An estimate of the	gross amount of b	usiness to b	e transacted by the	corporation	
	during the following year.							
(b)	(b) \$ 35,050 = An estimate of the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year.							
(c)	(c) // % = 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}							
	s application is ac s of which it is inc		rtificate of Good Standi	ng issued by the pro	oper officer o	of the state or countr	y under the	
13. This	s Application for C	ertificate of Authority	shall be effective upon	filing unless a specif	fied date is p	rovided which shall b	e no later	
thai	n the 90th day afte	er the date of this filin	g	•				
Date:	9 April	2013	Applica	ation for Certificate ments, and that all	of Authority statements	affirm that I have ex y, including any acc contained herein ar er of the Corporation	companying	
				RIAN W. TI	Hom AS	SR - Presibe	דעי	



The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02183

Date: April 08, 2013

To Whom It May Concern:

I hereby certify that according to the records of this office,

H. THOMAS ASSOCIATES, INC.

commonwealth of Massachusetts. I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth

on the date first above written.

Secretary of the Commonwealth

William Travin Galetin

Certificate Number: 13041754870

Verify this Certificate at: http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx

Processed by: smc