### 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**

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 name of the corporation is \_\_\_\_\_\_ Kelley & Ryan Associates, Inc.
- 2. It is incorporated under the laws of <u>Massachusetts</u>
- 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:

#### Same as above

(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 \_\_\_\_

\_\_\_\_and the period of its duration is \_\_\_\_\_

(Street Address not P.O. Box)

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5. The address of its principal office is 3 Rosenfeld Dr, Hopedaie, MA 01747

6. The address of its proposed registered office in Rhode Island is \_\_\_\_\_

	(Check Addibab, Net 1.0, Dox)		
Warwick	, RI <b>02888</b>	and the name of its proposed registered agent in Rhode Island at	
(City/Town)	(Zip Code)		
that address is			

(Name of Agent)

 The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are: Providing services and software support to municipalities within Rhode Island

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).

	Name	<u>Address</u>		
Director	Daniel P Kelley	58 West Millbury Rd, Sutton, MA 01590		
Director Peter F Ryan		152 Butman Rd, Lowell, MA 01852		
Director Director	FILED 12:09			
OCT 282013 pm Form No. 150 Revised: 06/11 By 209247 KM				

(b) The names and respective addresses of its principal officers (mandatory if directors are not required under the laws of the state or country of which it is incorporated).

<u>Name</u>	Address		
Daniel P Kelley	58 West Millbury Rd, Sutton, MA 01590		
Peter F Ryan	152 Butman Rd, Lowell, MA 01852		
Richard V Fitzgerald	9 Sadler Rd, Upton, MA 01568		
Richard V Fitzgerald	9 Sadler Rd, Upton, MA 01568		
	Daniel P Kelley Peter F Ryan Richard V Fitzgerald		

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 Shares	<u>Class</u>	Series	Par Value or Statement that Shares are without Par Value
15,000	Common	N/A	Without Par Value

10. (a) \$\_\_\_\_

\_\_\_\_ = An estimate of the value of all property to be owned by the corporation for the

(b) \$\_\_\_\_\_ = An estimate of the value of the corporation's property to be located within Rhode Island during the following year.

(c) % = An estimate, expressed as a percentage, of the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the following year, wherever located. *{divide (b) by (a) and multiply by 100 to obtain the percentage}* 

11. (a) \$\_\_\_\_

- (c) 0.416 % = 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 \_\_\_\_

following year, wherever located.

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

Date: \_\_\_\_

of Authony ed Office rporation

Daniel P Kelley

<sup>(</sup>b) \$\_\_\_\_\_\_\_ = 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.



William Francis Galvin Secretary of the Commonwealth

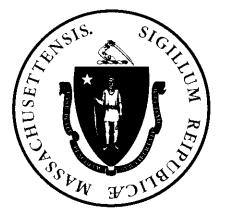
**The Commonwealth of Massachusetts** Secretary of the Commonwealth State House, Boston, Massachusetts 02183

Date: October 24, 2013

To Whom It May Concern :

I hereby certify that according to the records of this office, KELLEY & RYAN ASSOCIATES, INC.

is a domestic corporation organized on **June 20, 1994**, under the General Laws of the 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.

William Tranino Galicin

Secretary of the Commonwealth

Certificate Number: 13104641480 Verify this Certificate at: http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx Processed by: tad 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. ' apr loceio

A. RALPH MOLLIS Secretary of State

