Filing Fee \$50.00 Payable to: Secretary of State

0044994

PLEASE TYPE or PRINT

File Annually LLC: Sept. 1 - Nov. 1 CORP: Jan. 1 - March 1

State of Rhode Island and Providence Plantations Office of The Secretary of State

100 North Main Street Providence, Rhode Island 02903-1335 401-277-3040

0044994	101 211 0010	1994		
Corporate ID:		ort for the year:	 C.	
Name of Business Entity:		· Security section is secured to the section of the		
Business entity organized under the laws of the State of:	Business	Business Entity is (check one):		
Federal Taxpayer Identification Number:	,	National Service Corporation (See RIGL Chapter 7-1.1)		
For foreign entity, address and telephone number of principal office		[] Limited Liability Company (See RIGL 7-16)		
		le and mailing address of contact person to wh	hom	
		cations may be directed: 1:111am P Bowley		
		President		
Phone: ()]	1 Ann Are		
Address and telephone of the principal office of business entity in R	hode	Parkmouth RI 03871 Brief statement of the character of business conducted in Rhode Island:		
Island (Provide street address - Not P.O. Box):	Brief stat			
31 Ann Air	(û	onstruction		
0 1 0 1 0 7	20:01	1.1.6.16.7		
Providen Portsmouth RI		Organization: ///8/87		
Phone: (401) 683-9249	Date of Q	Qualification to do business in Rhode Island (if	f foreign entity):	
☐ CHIEF EXECUTIVE OFFICER OR ☐ PRESIDENT (Check One)	MES OF THE OFFICE! STREET ADDRESS	RS ARE:	ZIP CODE	
William P Bowley 21 An		Portsmouth, RI	09871	
CHIEF OPERATING OFFICER OR VICE PRESIDENT (Chock One)	STREET ADDRESS	CHASIAIE	ZIP CODE	
CUSTODIAN OF RECORDS OR SECRETARY (Check One)	STREET ADDRESS	CITY/STATE	ZIP CODE	
CHIEF FINANCIAL OFFICER OR TREASURER (Check One)	STREET ADDRESS	CITY/STATE	ZIP CODE	
Noney E. Bowley 21	Ann Ave	Portsmouth RI	7387	
NAME THE NAME	STREET ADDRESS	ORS ARE:	ZIP CODE	
NAME	STREET ADDRESS	CITY/STATE	ZIP CODE	
NAME				
VAME	STREET ADDRESS	CITY/STATE	ZIP CODE	
NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER O	F SHARES ISSUED AND OUTSTANDING	(If Applicable)	
NUMBER 200	NUMBER			
CLASS	CLASS	CLASS		
Common				
series without par	SERIES			
PAR VALUE OR	PAR VALUE			
WITHOUT PAR	WITHOUT F	'AR		
11 4 64	0	$O \sim i$		
Date 7eb 4 , 1994	By: / (Спед	(Da)ley		
	Nancy	Bowley		
	PRINT OR TYPE NAME OF OFFIC	ER SIGNING I		
	TITLE OF OFFICER SIGNING			
Form 31 1/94				
DESIGNATED DECISTEDED (D DECEDENCE + CONTROL	TAR SERVICE AS PRACESS		

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

WILLIAM P. BOWLEY 21 ANN AVENUE PORTSMOUTH RI 02871 FEE 2 6 000 BYME59 2550