Filing and License Fee: \$230.00 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

JUL 02 2014

PROFESSIONAL SERVICE CORPORATION

ARTICLES OF INCORPORATION

Th Ge	ne undersigned acting as incorporator(s) of a professional service corporation under Chapters 7-5.1 are eneral Laws of Rhode Island, 1956, as amended, adopt(s) the following Articles of Incorporation for such	nd 7-1.2 corpora	2 of the ition:
1	The name of the corporation is Pollard Law, Inc		
1.	(This is a close corporation pursuant to § 7-1.2-1701 of the General Laws, 1956, as amended.) (Strike if inapplicate	ile.)	
2.	The profession to be practiced through the professional service corporation is Law Firm		
3.	The total number of shares which the corporation has authority to issue is:		
	(a) If only one class: Total number of shares 750		
	<u>or</u>		
	(b) If more than one class: Total number of shares of each class		
	A statement of all or any of the designations and the powers, preferences, and rights, including voting rights, and to limitations, or restrictions of them, which are permitted by the provisions of Chapter 7-1.2 of the General Laws, 1956 respect of any class or classes of shares of the corporation and the fixing of which by the articles of association is express grant of the authority as it may then be desired to grant to the board of directors to fix by vote or votes any objected but which is not fixed by the articles:	, as ame desired	ended, in , and an
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		PH :2: 01	
4.	The address of the initial registered office of the corporation is:	$\ddot{\sim}$	9
	118 Danielson Pike	<u></u>	<:
	(Street Address, <u>not</u> P.O. Box)		
	Scituate , RI 02857 and the name of its initial regis	tered a	gent at
	(City/Town) (Zip Code)		
	such address is Scott M. Pollard		

5. The corporation shall have perpetual existence until dissolved or terminated in accordance with Chapter 7-1.2.

(Name of Agent)

6. Unless otherwise stated all authorized shares are deemed to have a nominal or par value of \$0.01 per share.

Form No. 112 Revised: 12/05

these Articles of Incorporation:	not inconsistent with Chapter 7-1.2 which the incorporators elect to have set forth in
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- And the state of	
the March Today Make a Michael Assessment	
8. The name and address of each i	ncorporator is:
<u>Name</u>	<u>Address</u>
Scott M. Pollard	118 Danielson Pike Scituate RI
9. These Articles of Incorporation sl	hall be effective upon filing unless a specified date is provided which shall be no later
•	of this filing
than the 90 day after the date c	THIS USING
	Under penalty of perjury, I/we declare and affirm that I/we have
	examined these Articles of Incorporation, including any accompanying attachments, and that all statements contained herein are true and correct.
Date: 7-2-14	Scott M. Pollard



Lawyer's Professional Liability Program (A Claims Made Policy)

Binder Confirmation

To: Tim Mailloux	Firm: CROSS INSURANCE INC RHODE ISLA
From: Kim Marks	Policy Number: LS 1621027

Re: Pollard Law, Inc.

We are pleased to confirm we have bound coverage for the above named insured as follows:

Twin City Fire Insurance Company

Period:	7/1/2014 to 7/1/2015		Retroactive Dat	e: 07/01/2014	
Limits:	\$250,000 \$500,000	Each Claim Aggregate	Deductible:	\$2,500 N/A	Each Claim Aggregate
Premium:	\$1,062.00		Commission:	10.00%	

ENDORSEMENTS:

Description	Endorsement #	
Declaration Page		
LP00M01900	Schedule of Endorsements,	
LP00H05300	Lawyers Professional Liability Insurance Policy,	
RN00N02601	In Witness Page,	
HG38H05000	Notice to Rhode Island PolicyHolders,	
HR00H04800	Policyholder Notice,	
HR00H09300	Producer Disclosure Notice,	
HR38H00100	Cancellation and Nonrenewal Endorsement,	
HR38H00501 (5-	06) Important Information for Rhode Island Policyholders,	
LP00H07500	Asbestos Exclusion Endorsement,	
LP00H08800	Mailing Address for Notice Endorsement,	
LP00H09400	Pollution Exclusion Endorsement,	
LP00H12100 (10-	-11) Network Security, Data Breach & Theft of Data End,	
	(2) Subpoena Coverage Endorsement,	
LP00H19001	Disciplinary Coverage Amendment,	
LP38H11001	Acknowledgment - Defense Within Limits	

Please review the above information. If there are any discrepancies, please notify us immediately. Your policy will follow shortly. Thank you for your business.

IMPORTANT NOTES:

Commission percentages shown are for direct commission only and do not include any applicable contingent commission or other forms of compensations.

2014 JUL -2 PH 12: 04



Name of Insurer: Twin City Fire Insurance Company

Indianapolis IN

LAWYERS' PROFESSIONAL LIABILITY POLICY

THIS IS A CLAIMS MADE AND REPORTED POLICY, PLEASE READ IT CAREFULLY. COVERAGE APPLIES ONLY TO CLAIMS FIRST MADE AGAINST THE INSURED DURING THE POLICY PERIOD OR APPLICABLE EXTENDED REPORTING PERIOD AND REPORTED IN WRITING TO THE COMPANY IMMEDIATELY BUT IN NO EVENT LATER THAN SIXTY (60) CALENDAR DAYS AFTER THE EXPIRATION DATE OF THE POLICY PERIOD OR APPLICABLE EXTENDED REPORTING PERIOD. THE LIMITS OF LIABILITY AVAILABLE TO PAY DAMAGES OR SETTLEMENTS SHALL BE REDUCED BY AMOUNTS INCURRED AS CLAIMS EXPENSES. THE DEDUCTIBLE IS APPLICABLE TO CLAIMS EXPENSES AND DAMAGES. PLEASE READ AND REVIEW THE POLICY CAREFULLY AND DISCUSS THE COVERAGE WITH YOUR INSURANCE AGENT, BROKER, OR REPRESENTATIVE.

POLICY NUMBER: LS 1621027

PRODUCER:

CROSS INSURANCE INC RHODE

ISLA

376 NEW PORT AVENUE EAST PROVIDENCE RI, 02916

SERVICE OFFICE:

Target Insurance Services 1230 East Diehl Road, Suite 350

Naperville, IL 60563

RENEWAL OF:

DECLARATIONS

ITEM # 1. NAMED INSURED AND MAILING ADDRESS:

Pollard Law, Inc. Attorneys at Law 118 Danielson Pike North Scituate, RI 02857-

ITEM # 2. POLICY PERIOD EFFECTIVE DATES:

FROM: 7/1/2014 TO: 7/1/2015

(12:01 A.M. standard time at the address shown in Item #1.)

ITEM # 3. RETROACTIVE DATE: 07/01/2014

ITEM # 4. LIMITS OF LIABILITY:

LIMIT OF LIABILITY EACH CLAIM \$250,000 AGGREGATE LIMITS OF LIABILITY \$500,000

ITEM # 5. DEDUCTIBLE:

DEDUCTIBLE EACH CLAIM \$2,500
AGGREGATE DEDUCTIBLE N/A

ITEM # 6. PREMIUM PER POLICY PERIOD: \$1,062.00

If applicable State Surcharge:

ITEM # 7. ENDORSEMENTS: (See attachments.)

July 2, 2014

Date

Authorized Representative