#### 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 corpo	ration is Harbor S	Seafood,	Inc.	•••							
2.	N. Ward												
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 prince of the corporation with the acabove corporate endings for use in Rhode Island:										oration", "company", ddition one of the		
	(b)	If the corporate na qualify and transa application:	me is not available oct business in Rh	e in Rhode ode Islan	e Island, the ed as stated	n set I in th	forth bei ne "Fictit	ow the fict ious Busir	titious name ness Name :	under which t Statement" to	he cerpo be filed ??	PRINCE ST	
4.	The	date of its incorpor	ation is 04/28/197	75			and the	period of it	s duration is	Perpetual	09	YTE	
5.													
6.	The address of its principal office is 969 Lakeville Road New Hyde Park, NY 11040  The address of its proposed registered office in Rhode Island is 222 Jefferson Boulevard Suite 200												
O.	(Street Address, not P.O. Box)												
	Wa	rwick (City/To	\\\\	, RI .	<b>02888</b> (Zip Code)	_ and	d the nar	ne of its pr	oposed regis	stered agent ir	n Rhode	Island at	
		` •	•	mnanv	(Zip Code)								
	that	address is Corpor			(Nan	ne of A	Agent)	· · · · · ·			2014	SE	
7.	The purpose or purposes which it proposes to pursue in the transaction of business in Rhode island are:  Wholesale distribution of frozen seafood.										M OCT	ORPO	
							****				-2	A SECTION	
8.	(a) cou	The names and r	espective address corporated).	es of its	directors (or	ptiona	al unless	directors	are required	under the la	ws of	1 See 8	
			<u>Name</u>						<u>Address</u>	i	<b>9</b>	YE	
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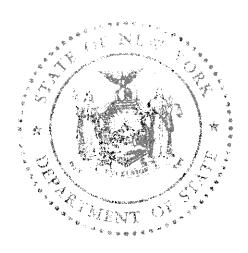
				<u>Name</u>	<u>Address</u>				
ı	President Christian			imberg		969 Lakevil	lle Road New Hyde Park, NY 11040	)	
,	Vice	President							
	Trea	asurer							
;	Sec	retary						_	
		•							
		aggregate numb series, if any, wit			issue; iter	nized by classe	es, par value of shares, shares without par valu	e,	
	Number of Shares 400			<u>Class</u>		Series	Par Value or Statement that Shares are without Par Value		
_				Common	N/A		No Par Value		
_								_	
_								_	
		e 66,000,000							
10. (a	(a)	following year, v	vherever locat		ite of the	value of all pro	roperty to be owned by the corporation for the	le	
(	(b)	\$ <u> </u>			te of the v	alue of the co	prporation's property to be located within Rhoo	je	
		Island during the	following yea	ır.					
(	(c)		o be located	within this state during	the follow	ing year bears	ortion that the estimated value of the property to the value of all property of the corporation bultiply by 100 to obtain the percentage.		
1. (		\$_285,000,000		= An estima	te of the g	ross amount o	of business to be transacted by the corporation	חנ	
		during the follow	ing year.						
(	b)	\$ 50,000 or from places of	business in F	= An estima Rhode Island during the	te of the gi e following	oss amount of year.	f business to be transacted by the corporation	at	
(	(c)		corporation be transacte	at or from places of b	usiness in	this state during	portion that the gross amount of business to be ng the following year bears to the gross amou (divide (b) by (a) and multiply by 100 to obta	nt	
12. T	This aws	application is ac	companied borporated.	y a certificate of Good	d Standing	issued by the	proper officer of the state or country under the	1e	
13.	Γhis	Application for C	ertificate of A	uthority shall be effecti	ve upon fil	ng unless a sp	pecified date is provided which shall be no later		
t	han	the 90th day afte	er the date of	this filing		·			
		,			Application	on for Certifica	y, I declare and affirm that I have examined the tate of Authority, including any accompanying all statements contained herein are true as	ng	

Type or Print Name of Authorized Officer

# State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of HARBOR SEAFOOD, INC. was filed on 04/28/1975, under the name of HARBOR SEAFOOD BROKERS, INC., with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.

A Certificate of Amendment HARBOR SEAFOOD BROKERS, INC., changing its name to HARBOR SEAFOOD, INC., was filed 06/23/1983.



SECRETARY OF STATE CORPORATIONS DIV

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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 19th day of August two thousand and fourteen.

Executive Deputy Secretary of State