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 _Lima Pro Painters, Inc._

2. It is incorporated under the laws of _Massachusetts_

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 _6/9/2014_ and the period of its duration is _Perpetual_

5. The address of its principal office is _290 Court St. #3W Plymouth, MA 02360_

6. The address of its proposed registered office in Rhode Island is _222 Jefferson Boulevard_
   (Street Address, not P.O. Box)

   Warwick , RI _02888_ and the name of its proposed registered agent in Rhode Island at
   (City/Town)   (Zip Code)

   that address is _InCorp Services, Inc._
   (Name of Agent)

7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:

   Painting Company

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	_Address_
Director		
Director		
Director		
Director		

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By _272394_

(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).

	Name	*Address*
President	Fabiano Rodrigues Lima	290 Court St, #3W, Plymouth, MA 02360
Vice President	SAME AS ABOVE	SAME AS ABOVE
Treasurer	SAME AS ABOVE	SAME AS ABOVE
Secretary	SAME AS ABOVE	SAME AS ABOVE

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	Class	Series	Par Value or Statement that Shares are without Par Value
100,000	CMP	—	0

10. (a) $ 0 = An estimate of the value of all property to be owned by the corporation for the following year, wherever located.

(b) $ 0 = An estimate of the value of the corporation's property to be located within Rhode Island during the following year.

(c) 0 % = 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) $ 0 = An estimate of the gross amount of business to be transacted by the corporation during the following year.

(b) $ 0 = 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) 0 % = 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 Upon Filing .

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: 4-12-16

_____
Signature of Authorized Officer of the Corporation

Fabiano Rodrigues Lima
Type or Print Name of Authorized Officer

The Commonwealth of Massachusetts
Secretary of the Commonwealth
State House, Boston, Massachusetts 02133

William Francis Galvin
Secretary of the
Commonwealth

Date: April 12, 2016

To Whom It May Concern :

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

LIMA PRO PAINTERS INCORPORATED

is a domestic corporation organized on **June 09, 2014**   , under the General Laws of the

Commonwealth of Massachusetts. I further certify that there are no proceedings presently pend-

ing 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 cor-

poration 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

Certificate Number: 16048840890

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

Processed by: tgr