

## State of Rhode Island and Providence Plantations Department of State - Business Services Division 148 W. Piver Street, Providence, Phode Island 02004, 2615

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV

## Application for Certificate of Authority Foreign Business Corporation

Filing and License Fee: \$310.00 minimum

Pursuant to the provisions of RIGL <u>7-1.2-1405</u>, 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:				
MARCHAND CONSTOUCTION INC.				
2. It is incorporated under the laws of:  MASSAChuseffs				
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: $3/33/16$				
And the period of its duration is: CHECK ONLY ONE BOX  Perpetual (on-going)				
Date certain for dissolution				
5. The address of its principal office is:				
191 mt hope st. N. Attleboio, MA. 02760				
5. The address of its principal office is:				

FILED

MAY 25 2016

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6. The name and address of the initial registered agent/office of in Rhode Island:				
Agent Name	* MARK	O. Tourgee Esq. #3296		
Street Address (NOT a P.O. Box)  1500 NooseNeck Hill Road:				
Coventay	State RH	IODE ISLAND Zip Code		
7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:				
Lowstra	actien Projects, Re	emodeling, Decks, Roots		
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	4	ADDRESS		
Mike Marchan	hand 191 mt hope st. N.AH/leboro, MA. 02760			
Check the box to indicate an attachment.  8. (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):				
OFFICE	NAME	ADDRESS		
PRESIDENT	Mite Marchand	191 Mt. hope st. N. Attlebro, M.		
VICE PRESIDENT	SAMe	00760		
TREASURER	SAME			
SECRETARY	SAME SAME			
		Check the box to indicate an attachment.		
	er of shares which it has authority to i eries, if any, within a class, is:	ssue; itemized by classes, par value of shares, shares		
NUMBER OF SHARES	CNJB	PAR VALUE OR STATE NO PAR VALUE  O. OO		

10. (a) Estimate, in dollars, the value of all prope located:	erty to be owned by the corporation for the follow	ring year, wherever		
\$ 5,000.00				
(b) Estimate, in dollars, the value of the corporation year:	on's property to be located within Rhode Island d	luring the following		
\$ 3,000.00				
(c) Estimate, <b>as a percentage</b> , 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. <i>Note: Divide (10b) by (10a) and multiply by 100 to obtain the percentage</i> .				
<u>60</u> %				
11. (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year.				
\$ 15,000.00				
(b) Estimate, in dollars, the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year.				
\$ <u>7,500.</u>				
(c) Estimate, <b>as a percentage</b> , the proportion 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 compared to the gross amount thereof which will be transacted by the corporation during the following year. <i>Note: Divide (11b) by (11a) and multiply by 100 to obtain the percentage</i> .				
<u>50</u> %				
12. This application must be accompanied by a Certificate of Good Standing/Letter of Status issued by the proper officer of the state or country under the laws of which it is incorporated that is dated within 60 days of the filing of this document.				
13. Date when the Certificate of Authority will be e	ffective: CHECK ONLY ONE BOX			
Date received (Upon filing)				
Later effective date (Date must be no more than 90 days from the day of 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.				
Signature of Authorized Officer of the Corporation	Type or Print Name of Authorized Officer	Date		
Man Mahill	Mike Marchand	5/25/16		

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email corporations@sos.ri.gov.



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

Date: May 19, 2016

To Whom It May Concern:

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

## MARCHAND CONSTRUCTION INC

is a domestic corporation organized on March 23, 2016 , 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.

Secretary of the Commonwealth

William Tranin Galein

Certificate Number: 16059510490

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

Processed by: jmu