

State of Rhode Island and Providence Plantations Department of State - Business Services Division

148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

Application for Certificate of Authority Foreign Business Corporation

Filing and License Fee: \$310.00 minimum

Pursuant to the provisions of RIGL 7-1.2-1405, 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:	
Commonwealth Financial Corporation	
2. It is incorporated under the laws of:	Massachusetts
3. The name, if different, which it elects to use in Rhod	le Island is:
(a) If the name of the corporation in its jurisdiction of in "incorporated", or "limited," or an abbreviation thereof, the above corporate endings for use in Rhode Island:	corporation does not contain the word "corporation", "company", then list the name of the corporation with the addition of one of
(b) If the corporate name is not available in Rhode Isla corporation will qualify and transact business in Rhode be filed with this application:	and, then set forth below the fictitious name under which the sIsland as stated in the "Fictitious Business Name Statement" to
4. The date of its incorporation is:	11/23/2005
And the period of its duration is: CHECK ONLY ONE E Perpetual (on-going)	вох
Date certain for dissolution	
5. The address of its principal office is:	4,
101 Federal Street, Suite 800, Boston, MA 0	02110

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6. The name and addre	ess of the initial	registered agr	ent/office	of in Rhode Island:		
Agent Name Corpo	oration Servic	e Compar	ıy			
Street Address (NOT a	P.O. Box) 227	2 Jefferson	ı Blvd.	Suite 200		
City/Town Warwick	City/Town Warwick		State RH0	ODE ISLAND	Zip Code 02888	
7. The purpose or purp	oses which it pro	oposes to pur	sue in th	e transaction of busin	ness in Rhode Island are:	
Sale of financial (products thro	ough indep	penden	t agents		
8. (a) The names and r state or country of which			ectors (o	ptional, unless directo	ors are required under the laws of the	
NAME				ADDRE	SS	
Richard A. St. Jea	ın, Jr.	101 Feder	al Stre	ral Street, Suite 800, Boston, MA 02110		
		- 				
				· · ·		
8. (b) The names and n					the box to indicate an attachment.	
OFFICE	T	NAME	11.		ADDRESS	
PRESIDENT	Richard A.		Jr.	101 Federal Str	reet, Suite 800, Boston, MA 02	
VICE PRESIDENT	1			100000		
TREASURER	Richard A. St. Jean, Jr.		 Jr.	101 Federal Str	reet, Suite 800, Boston, MA 02	
SECRETARY	Richard A. St. Jean, Jr		Jr.	101 Federal Street, Suite 800, Boston, MA 02		
					he box to indicate an attachment.	
9. The aggregate numb without par value, and s	er of shares whi series, if any, wit	ch it has auth hin a class, is	ority to is	ssue; Itemized by clas	sses, par value of shares, shares	
NUMBER OF SHARES	CLASS	,	SE	RIES	PAR VALUE OR STATE NO PAR VALUE	
200	Common	ı			No Par	
						
	,					
	 					
						

Form No. 150 Revised: 2016

10. (a) Estimate, in dollars, the value of all proper located:	erty to be owned by the corporation for the	following year, wherever			
\$ 875,000					
(b) Estimate, in dollars, the value of the corporation year:	on's property to be located within Rhode Is	sland during the following			
\$ <u>100,000</u>					
(c) Estimate, as a percentage, the proportion tha within this state during the following year bears to following year, wherever located. Note: Divide (10)	the value of all property of the corporation	n to be owned during the			
%					
11. (a) Estimate, in dollars, the gross amount of bu	siness to be transacted by the corporation	during the following year.			
\$_10,000,000					
(b) Estimate, in dollars, the gross amount of busin in Rhode Island during the following year.	ess to be transacted by the corporation at	t or from places of business			
\$					
(c) Estimate, as a percentage, 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. Note: Divide (11b) by (11a) and multiply by 100 to obtain the percentage.					
%					
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			
SIGN DOCUMENT HERE	Richard A. St. Jean, Jr.	May <u>3</u> /2016			
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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

May 20, 2016

TO WHOM IT MAY CONCERN:

I hereby certify that

THE ISLAND FINANCIAL GROUP, INC.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on November 23, 2005.

I also certify that by Articles of Amendment filed here **December 15, 2005**, the name of said corporation was changed to

COMMONWEALTH FINANCIAL CORPORATION

I also certify that so far as appears of record here, said corporation still has legal existence.



Processed By sam

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 Travin Galicin

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

