

 State of Rhode Island and Providence Plantations

 Department of State - Business Services Division

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

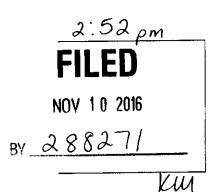
 Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov



Application for Certificate of Authority Foreign Business Corporation Filing and License Fee: \$310.00 minimum

Pursuant to the provisions of RIGL <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:				
AVB Service Provider, Inc.				
2. It is incorporated under the laws of:	Maryland			
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 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:	1/10/02			
And the period of its duration is: CHECK ONLY ONE BOX Image: Perpetual (on-going)				
Date certain for dissolution				
5. The address of its principal office is:				
Ballston Tower, 671 N. Glebe Road, Suite 800, Arlington, VA 22203				



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6. The name and address of the initial registered agent/office of in Rhode Island:					
Agent Name C T Corp	oration System				
Street Address (<u>NQT</u> a P.O. Box) 450 Veterans Memorial Parkway, Suite 7A					
City/Town East Providenc	ce	State RHODE ISLAND	Zip Code 02914		
7. The purpose or purpo	7. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:				
Real estate development,					
8. (a) The names and re state or country of whicl	espective addresses of its di h it is incorporated):	irectors (optional, unless direct	ors are required under the laws of the		
NAME		ADDRE	ISS		
Timothy J. Naughton	Ballston Tov	er, 671 N. Glebe Road, Suite 800, Arlington, VA 22203			
Kevin P. O'Shea	Ballston Tov	ver, 671 N. Glebe Road, Suite 800, Arlington, VA 22203			
			the box to indicate an attachment.		
8. (b) The names and re laws of the state or coul	espective addresses of its p ntry of which it is incorporate	rincipal officers (mandatory if d ed):	irectors are not required under the		
OFFICE	NAME				
PRESIDENT	Timothy J. Naughton	Ballston Twr 671 N	Glebe Rd, Ste 800, Arlington, VA 22203		
VICE PRESIDENT	Catherine T. White	ite Ballston Twr 671 N. Glebe Rd, Ste 800, Arlington,			
TREASURER	Keri A. Shea	Ballston Twr 671 N	Ballston Twr 671 N. Glebe Rd, Ste 800, Arlington, VA 2220		
SECRETARY	Edward M. Schulman	Ballston Twr 671 N	Ballston Twr 671 N. Glebe Rd, Ste 800, Arlington, VA 22203		
······································		Check	the box to indicate an attachment.		
9. The aggregate numb without par value, and s	er of shares which it has au series, if any, within a class,	thority to issue; itemized by cla	asses, par value of shares, shares		
NUMBER OF SHARES	CLASS	SERIES	PAR VALUE OR STATE NO PAR VALUE		
10,000	Common		\$0.01		
		,,,,,			
		<u></u>			

Form No. 150 Revised: 2016

10.	(a)	Estimate, in dollars,	the value of all pr	operty to be	owned by	the corporation for	or the followin	ig year, where\	ver
loca	ted:								

\$_⁰

(b) Estimate, in dollars, the value of the corporation's property to be located within Rhode Island during the following year:

\$				
(c) Estimate, as a percentage , the proportion that within this state during the following year bears to t following year, wherever located. <i>Note: Divide (10b)</i>	he value of all property of the corporation to be	owned during the		
%				
11. (a) Estimate, in dollars, the gross amount of bus	iness to be transacted by the corporation during	the following year.		
\$				
(b) Estimate, in dollars, the gross amount of busine in Rhode Island during the following year.	ess to be transacted by the corporation at or fror	n places of business		
\$_ ⁰				
(c) Estimate, as a percentage , the proportion of th or from places of business in Rhode Island during be transacted by the corporation during the followin percentage.	the following year compared to the gross amour	it thereof which will		
0%				
12. This application must be accompanied by a Ce officer of the state or country under the laws of whi document.	rtificate of Good Standing/Letter of Status issue ich it is incorporated that is dated within 60 days	d by the proper of the filing of this		
13. Date when the Certificate of Authority will be ef	fective: CHECK ONLY ONE BOX			
Date received (Upon filing)				
—		f Authority including		
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		
ALAGN DOCUMENT HERE	Catherine T. White - VP, Assoc. GC & Asst. Sec ¹ .	11/08/16		

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.

STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT AVB SERVICE PROVIDER, INC., INCORPORATED JANUARY 10, 2002, IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS NOVEMBER 09, 2016.

Michael L. Higgs Deputy Director





301 West Preston Street, Baltimore, Maryland 21201 Telephone Balto. Metro (410) 767-1340 / Outside Balto. Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice Fax (410) 333-7097

R0010372807



State of Rhode Island and Providence Plantations **Department of State** | **Office of the Secretary of State Nellie M. Gorbea**, Secretary of State

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:

Tulli U. Hole

Nellie M. Gorbea Secretary of State

