

This information is currently of record in the Office of the Secretary of

State. Changes require an additional filing. See Section 9 of

instruction sheet.

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

ovidence, RI 02904-2615

401.222.3040

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is

subject to a penalty fee of \$25.00. 5. State of Incorporation OFFICERS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Street Address State Zip City Treasurer Name Street Address Zip City State Zip State City 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) [] FILL IN SPACES BEFORE USING ATTACHMENTS Street Address Street Address Zip State State Zip City City Director Name Director Name Street Address Street Address State Zip City State 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 9. SHARES AUTHORIZED ISSUED SHARES — THIS SECTION MUST BE COMPLETED Par Value

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee,

this report must	be executed on behalf of the corp	poration by the receiver or tru	istee.	
	ages and a second	¬ FILED	Under penalty of perjury, I declare and affir including any accompanying schedules and contained herein are true and correct.	m that I have examined this report, statements, and that all statements
File Date	Kara A	FEB 0 2 2017	Grego M. Wiann	Dhite T
Check No.		4005	13-34 or Hipe Name	Panni
FOR SEC	TRETARY OF STATE USE ONL		Title 3	Form 630 Rev. 08/08