STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS SVCS DIV
Office of the Secretary of State
Corporations Division
259!X /!Sjwf sTuf f u
Providence, Rhode Island 02905.3726

APPLICATION FOR
RESERVATION OF ENTITY NAME

The undersigned applicant hereby applies for reservation of the following entity name for a non-renewable period of one hundred twenty (120) days from the date of this filing (other than as provided under Section 7-13-3 of the General Laws of Rhode Island, 1956, as amended).

R&Q RI Insurance Company
_____
(Name to be Reserved)

The name is being reserved for the following type of entity pursuant to the applicable statutory provision:

(Check One Only)

Filing Fee

☑ Business Corporation (including professional and foreign corporations) pursuant to
Section 7-1.2-403 of the General Laws of Rhode Island, 1956, as amended. ($50.00)

☐ Limited Partnership (including foreign limited partnerships) pursuant to
Section 7-13-3 of the General Laws of Rhode Island, 1956, as amended. ($50.00)

☐ Limited Liability Company (including foreign limited liability companies) pursuant to
Section 7-16-10 of the General Laws of Rhode Island, 1956, as amended. ($50.00)

☐ Non-Profit Corporation (including foreign non-profit corporations) pursuant to
Section 7-6-11.1 of the General Laws of Rhode Island, 1956, as amended. ($20.00)

The name reservation will be recorded exclusively in the name of the applicant. The right to the exclusive use of a specified entity name so reserved may be transferred to any other person by filing in the office of the Secretary of State a notice of the transfer, executed by the applicant for whom the name was reserved, specifying the name and address of the transferee, and paying the appropriate fee.

Name and Address of Applicant:

Randall & Quilter America Holdings Inc.

FILED

APR 10 2017

BY _____

Date: April 5, 2017

Two Logan Square, Suite 600

Philadelphia, PA 19103

Under penalty of perjury, I declare and affirm that the information contained herein is true and correct.

Submitted by: _____
(Signature)

_____
(Address, if different from above)

Form No. 620
Revised: 23/05