



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



REINSTATEMENT



1. Entity ID Number: 30550	2. The name of the entity is: Portuguese Beneficial Association Don Luiz Filipe																																				
3. Date of Revocation: 2/25/2009	4. Reason for Revocation: Annual Report																																				
5. Entity Type: Non-Profit																																					
6. The reinstatement includes: <table> <tr> <td><input checked="" type="checkbox"/> Annual Reports (# of reports)</td> <td>10</td> <td>(report filing fee) \$ 20</td> <td>Total Fees \$ 200</td> </tr> <tr> <td><input checked="" type="checkbox"/> Penalty fees (# of years)</td> <td>9</td> <td>(penalty fee) \$ 25</td> <td>Total Fees \$ 225</td> </tr> <tr> <td><input type="checkbox"/> Replacement filing fee</td> <td>\$</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> LOGS (Tax Good Standing)</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Legislative Act/Court Order</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Change of Agent Form (filing fee) \$</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Change of Registered Office Form - NO FEE</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Certificate of Correction</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Amendment (name change required)</td> <td></td> <td></td> <td></td> </tr> </table>		<input checked="" type="checkbox"/> Annual Reports (# of reports)	10	(report filing fee) \$ 20	Total Fees \$ 200	<input checked="" type="checkbox"/> Penalty fees (# of years)	9	(penalty fee) \$ 25	Total Fees \$ 225	<input type="checkbox"/> Replacement filing fee	\$			<input type="checkbox"/> LOGS (Tax Good Standing)				<input type="checkbox"/> Legislative Act/Court Order				<input type="checkbox"/> Change of Agent Form (filing fee) \$				<input type="checkbox"/> Change of Registered Office Form - NO FEE				<input type="checkbox"/> Certificate of Correction				<input type="checkbox"/> Amendment (name change required)			
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7. The reinstatement is accompanied by:																																					

FILED ✓

JUN 30 2017 11:20

BY CU 307422