RI SOS Filing Number: 201747207350 Date: 7/10/2017 11:05:00 AM

| State of Phode Island and Providence Districtions | 1 | |
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| State of Rhode Island and Providence Plantations Department of State - Business Services D | RECEIVED R.I. DEPT. OF STATE BUS SVCS DIV | |
| Certificate of Authority FOREIGN Corporation | 2017 JUN 22 AM 11: 14 | .ae |
| → Filing Fee: \$310.00 minimum | | R.1. DE BUS 2017 JUL |
| Pursuant to the provisions of RIGL <u>7-1.2-1405</u> , the undersigned applies for a Certificate of Authority to transact business in the S for that purpose submits the following statement: | foreign corporation hereby State of Rhode Island, and | DEPT. OF BUS SVCS |
| The name of the corporation is: | | A DOVA |
| Hallmark Electrical Systems, Inc | | :05 |
| 2. It is incorporated under the laws of: | | |
| 3. The name, if different, which it elects to use in Rhode Island | is: | |
| (a) If the name of the corporation in its jurisdiction of incorporat "incorporated", or "limited," or an abbreviation thereof, then list above corporate endings for use in Rhode Island: | ion does not contain the word "corporati the name of the corporation with the add | on", "company", dition of one of the |
| (b) If the corporate name is not available in Rhode Island, then corporation will qualify and transact business in Rhode Island a filed with this application: | set forth below the fictitious name unders stated in the "Fictitious Business Nam | r which the le Statement" to be |
| 4. The date of its incorporation is: 10-20-2009 | | |
| And the period of its duration is: CHECK ONLY ONE BOX Perpetual (on-going) | | |
| Date certain for dissolution | | |
| 5. The address of its principal office is: | | |
| 19 Webster St. Taunton, MA 02780 | | |
| 6. The name and address of the initial registered agent/office of | in Rhode Island: | |
| Agent Name Registered Agents Inc | | |
| Street Address (NOT a P.O. Box) One Richmond Square, STE | 125B | |

State

RHODE ISLAND

MAIL TO:

Division of Business Services

City/Town Providence

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

Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED**

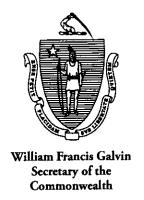
Zip Code 02906

JUL 10 2017. 34 307 840

FORM 150 - Revised: 08/2015 A. m

| 8. (a) The names and respective addresses of its directors (optional, unless directors are required under the laws of state or country of which it is incorporated): NAME Check the box to indicate an attachme 8. (b) The names and respective addresses of its principal officers (mandatory if directors are not required under the of the state or country of which it is incorporated): OFFICE NAME ADDRESS PRESIDENT Jaime Cunha 257 Plain St. Taunton MA 02780 VICE PRESIDENT Eric Batista 117 Clearview Ave. Someret, MA 02726 TREASURER SECRETARY Check the box to indicate an attachme 9. The aggregate number of shares which it has authority to issue; Itemized by classes, par value of shares, shares we par value, and series, if any, within a class, is: NUMBER OF SHARES CLASS SERIES PAR VALUE OR STATE NO PAR VALUE OR STAT | | poses which it proposes to pursue in | the transaction of b | usiness in Rhode Island are: |
|--|--|--|--------------------------------------|--|
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| | Ψ <u></u> | | Ф | |
| (c) Estimate, as a percentage, the proportion that the estimated value of the property of the corporation to be located within this state during the following year bears to the value of all property of the corporation to be owned during the | within this state during th | ne following year bears to the value : | of all property of the | corporation to be owned during the |
| following year, wherever located. Note: Divide (10b) by (10a) and multiply by 100 to obtain the percentage. | | Tocated. Note: Divide (100) by (10a) |) and multiply by 10 | 0 to obtain the percentage. |
| <u> </u> | 0/ | | | |

| 11. (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year. | | | | | |
|--|--------------|---------|--|--|--|
| \$ | \$_50,000.00 | | | | |
| (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. <i>Note: Divide (11b) by (11a) and multiply by 100 to obtain the percentage.</i> | | | | | |
| . <u>05</u> % | | | | | |
| 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 effective: 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. | | | | | |
| Type or Print Name of Authorized Officer | | Date | | | |
| Jaime Cunha | | 6-21-17 | | | |
| Signature of Authorized Officer of the Gorporation MINISTRUMENT HERE | | | | | |



The Gommonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02183

June 27, 2017

TO WHOM IT MAY CONCERN:

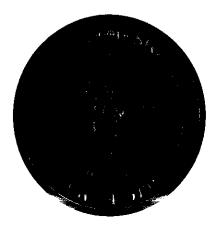
I hereby certify that according to the records of this office,

HALLMARK ELECTRICAL SYSTEMS, INC.

is a domestic corporation organized on October 20, 2009, under the General Laws of the Commonwealth of Massachusetts.

I further certify that there are no proceedings presently pending under the Massachusetts General Laws Chapter 156D section 14.21 for said corporation's dissolution; that articles of dissolution have not been filed by said corporation; that, said corporation has filed all annual reports, and paid all fees with respect to such reports, and so far as appears of record said corporation has legal existence and is in good standing with this office.

R.I. DEPT. OF STATE BUS SVCS DIV



In testimony of which,

I have hereunto affixed the

Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

lean Travino Gallein

Processed By: sam

RI SOS Filing Number: 201747207350 Date: 7/10/2017 11:05:00 AM



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:

July 10, 2017 11:05 AM

Nellie M. Gorbea Secretary of State

Tullin U. Soler

