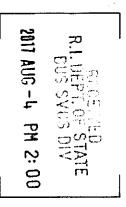


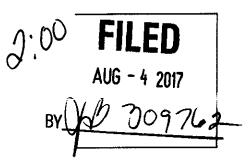
State of Rhode Island and Providence Plantations Department of State - Business Services Division 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov



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:					
AshBritt, Inc.					
2. It is incorporated under the laws of:	Florida				
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 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:	10/28/1992				
And the period of its duration is: CHECK ONLY ONE BOX X Perpetual (on-going) X Perpetual (on-going)					
Date certain for dissolution					
5. The address of its principal office is:					
565 E Hillsboro Blvd, Deerfield Beach, FL 33441					



Form No. 150 Revised: 2016

6 The name and odd	one of the initial			of in Dhade leter 1	
6. The name and addr	ess of the Initial	registered ag	jent/office	of in Rhode Island;	
Agent Name C T Cor	poration System				
Street Address (<u>NOT</u> a	a P.O. Box) 450	Veterans Men	norial Park	way, Suite 7A	
City/Town East Providence		State RHC	DDE ISLAND	Zip Code 02914	
7. The purpose or purp	poses which it pr	oposes to pu	rsue in the	transaction of bus	iness in Rhode Island are:
Disaster debris removal					
8. (a) The names and r state or country of whic			rectors (op	otional, unless direc	tors are required under the laws of the
NAME				ADDR	ESS
Randal Perkins	565 E Hillsbo		ro Blvd, Deerfield Beach, FL 33441		
Brittany Perkins	565 E Hillsbo		pro Blvd, Deerfield Beach, FL 33441		
Elliot Melamed		565 E Hillsbo	oro Blvd, Deerfield Beach, FL 33441		
8 (h) The names and r	aspective addre	sees of its ori			the box to indicate an attachment.
laws of the state or cou				cers (manuatory in	
OFFICE		NAME		ADDRESS	
PRESIDENT	Brittany Perkin	S		565 E Hillsboro Blvd, Deerfield Beach, FL 33441	
VICE PRESIDENT	John Noble			565 E Hillsboro Blvd, Deerfield Beach, FL 33441	
TREASURER	Elliot Melamed	Elliot Melamed		565 E Hillsboro Blvd, Deerfield Beach, FL 33441	
SECRETARY	Elliot Melamed			565 E Hillsboro Blvd, Deerfield Beach, FL 33441	
				Check	the box to indicate an attachment.
9. The aggregate numb without par value, and s				sue; itemized by cla	asses, par value of shares, shares
NUMBER OF SHARES	CLASS			IES	PAR VALUE OR STATE NO PAR VALUE
7500	Common				1.00
<u>a aran ananana a</u>		- <u></u>	<u> </u>	·	
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Form No. 150 Revised: 2016

10.	(a)	Estimate, in dollars, the value of all property to be owned by the corporation for the following year, wherever
loca	ted:	

\$ ^{749,099}

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

\$⁰

(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 following year, wherever located. Note: Divide (10b) by (10a) and multiply by 100 to obtain the percentage.

0____%

11. (a) Estimate, in dollars, the gross amount of business to be transacted by the corporation during the following year.

\$ 10,000,000.00

(b) Estimate, in dollars, the gross amount of business to be transacted by the corporation at or from places of business in Rhode Island during the following year.

\$_⁰

(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. *Note: Divide (11b) by (11a) and multiply by 100 to obtain the percentage*.

0____%

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.

Signature of Authorized Officer of the Corporation	Type or Print Name of Authorized Officer	Date
SON DOCHMENT HERE	John Noble	8/3/17

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.

Form No. 150 Revised: 2016

State of Florida Department of State

I certify from the records of this office that ASHBRITT, INC. is a corporation organized under the laws of the State of Florida, filed on October 28, 1992.

The document number of this corporation is P9200000600.

I further certify that said corporation has paid all fees due this office through December 31, 2017, that its most recent annual report/uniform business report was filed on July 17, 2017, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Third day of August, 2017



Ken Detren Secretary of State

Tracking Number: CU9690870736

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication



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:

August 04, 2017 02:00 PM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

