



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:

Moore and Associates Engineering and Consulting, Inc.

2. It is incorporated under the laws of:

South Carolina

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:

October 4, 2004

And the period of its duration is: CHECK ONLY ONE BOX

Perpetual (on-going)

Date certain for dissolution October 4, 2004

5. The address of its principal office is:

1009 East Ave, North Augusta, SC 29841

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Form No. 150 Revised: 2016

6. The name and addre	ss of the initial	registered ag	ent/office of in Rhode Island:		
Agent Name Regist	ered Agent,	Inc.			
Street Address (<u>NOT</u> a	P.O. Box) On	e Richmor	nd Square, Suite 125B		
City/Town Providenc	e		State RHODE ISLAND	Zip Code 02906	
7. The purpose or purpo	oses which it pr	oposes to pu	rsue in the transaction of busine	ss in Rhode Island are:	
Engineering					
8. (a) The names and restate or country of whic			ectors (optional, unless director	s are required under the laws of the	
NAME			ADDRES	S	
Wayne S. Moore		1009 East	Ave, North Augusta, SC	29841	
			Check th	e box to indicate an attachment.	
8. (b) The names and re laws of the state or cou			incipal officers (mandatory if dire	ectors are not required under the	
OFFICE	NAME			ADDRESS	
PRESIDENT	Wayne S. Moore		1009 East Ave, I	North Augusta, SC 29841	
VICE PRESIDENT	· ·				
TREASURER					
SECRETARY					
	1				
9. The appreciate numb	er of charge w	hich it has aut		e box to indicate an attachment.	
without par value, and				ses, par value of shares, shares	
NUMBER OF SHARES CLASS		S	SERIES P	AR VALUE OR STATE NO PAR VALUE	
1000		r	o par value		
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10. (a) Estimate, in dollars, the value of all property to be owned by the corporation for the following year, wherever located:

\$ ⁰

(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.*

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

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(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.

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(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.*

%

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
STOL STOLLERE	Wayne S. Moore	10/11/17

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.

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e Plantations al Engineers		and Consi	of having the horized to pra			<i>ILAND</i>	Expires:	Firster Kubulon Secretary
State of Rhode Island and Providence Plantations Board of Registration for Professional Engineers	T KNOWN THAT	Engineering and Consulting, Inc	having given satisfactory evidence of having the qualifications required by law is hereby authorized to practice	ngineering as a Corporation	Civil	STATE OF RHODE ISLAND	Issued: 10/10/2017	R.1. DEPT. OF SIME 2017 OCT 16 PH 12: 12
State of Rhode Isl Board of Registra	BEIJ	Moore and Associates 1	aving given satis ons required by I	E		IN THE ST	ization No.: 8516	O Milorie
		Moore and	hé qualificatio				Certificate of Authorization No.:	Chairperson

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

MOORE AND ASSOCIATES ENGINEERING AND CONSULTING, INC., a corporation duly organized under the laws of the State of South Carolina on October 4th, 2004, and having a perpetual duration unless otherwise indicated below, has as of the date hereof filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the corporation that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-14-210, and that the corporation has not filed articles of dissolution as of the date hereof.

> Given under my Hand and the Great Seal of the State of South Carolina this 11th day of October, 2017



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:

October 16, 2017 12:12 PM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

