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

Certificate of Authority

FOREIGN Corporation

Website: www.sos.ri.gov

 \rightarrow Filing 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:		~
Capital Building	+ Design, J	MC.
2. It is incorporated under the laws of: MAS	SACHUSET	TTS
3. The name, if different, which it elects to use in Rho	de Island is:	
(a) If the name of the corporation in its jurisdiction of "incorporated", or "limited," or an abbreviation thereof above corporate endings for use in Rhode Island:	•	
(b) If the corporate name is not available in Rhode Isl corporation will qualify and transact business in Rhod filed with this application:		
4. The date of its incorporation is: $03/01/3$		
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:		11 1 10077
585 Milford Roa	d, Swanse	ra, MH 02777
6. The name and address of the initial registered age	nt/office of in Rhode Island:	
Agent Name Karen Angeri Be Street Address (NOT a P.O. Box)	? N. S. M. j	
City/Town NEWPORT	State RHODE ISLAND	Zip Code 02840
		12:55 pm
MAIL TO:		FILED
Division of Business Services		
148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040		DEC 27 2017

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7. The purpose or purpo	oses which it p	roposes to pursue in	the transaction of bu	usiness in Rhode Island are:
		ction service		new and renovations
8. (a) The names and restate or country of which			optional, unless dir	ectors are required under the laws of the
NAME		ADDRESS		
Ronald L Eutow 329 A		329 Peul	se Rd Swi	used the osma
Doreen MEaton "		fs.	//	1 1
				Check the box to indicate an attachment.
I. (b) The names and read the state or country or the state or country or	•		officers (mandatory	if directors are not required under the laws
OFFICE		NAME		ADDRESS
PRESIDENT	Ronali	d Eaton	329 Pea	erse Rd, Swansed, M
VICE PRESIDENT	11			02777
TREASURER		1 (
SECRETARY	1	1		
			·····	Check the box to indicate an attachment.
. The aggregate numb ar value, and series, if			to issue; itemized by	classes, par value of shares, shares without
NUMBER OF SHARES	CLAS	· - ·	SERIES	PAR VALUE OR STATE NO PAR VALUE
20,000-				NO PAR
				
			· · · · · · · · · · · · · · · · · · ·	
0. (a) Estimate, in dol wned by the corporation				ollars, the value of the corporation's property in Rhode Island during the following year:
ocated: <u>\$200,000</u>		\$ <u>~</u>	0-	
ithin this state during t	he following ye	ear bears to the value	e of all property of the	roperty of the corporation to be located e corporation to be owned during the 00 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.	(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.			
s <u>4,000,000-</u>	s_1,500,000			
(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>				
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 day 	vs from the day of filing) $1/1/2018$			
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			
Bonald L. Eaton	12-19-2017			
Signature of Authorized Officer of the Corporation				
I must feet SIGN DOCUMENT HERE				

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The Commonwealth of Massachusetts Secretary of the Commonwealth State House, Boston, Massachusetts 02188

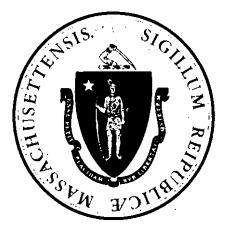
William Francis Galvin Secretary of the Commonwealth

Date: December 20, 2017

To Whom It May Concern:

I hereby certify that according to the records of this office, CAPITAL BUILDING & DESIGN, INC.

is a domestic corporation organized on **March 01, 2001**, 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.



In testimony of which, I have hereunto affixed the Great Seal of the Commonwealth on the date first above written.

Villian Themins Galecin

Secretary of the Commonwealth

Certificate Number: 17120447260 Verify this Certificate at: http://corp.sec.state.ma.us/CorpWeb/Certificates/Verify.aspx Processed by:



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:

December 27, 2017 12:55 PM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

