



**State of Rhode Island and Providence Plantations  
Office of the Secretary of State**

Fee: \$10.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Application for Certificate of Withdrawal**

(Section 7-6-83 of the General Laws of Rhode Island, 1956, as amended)

**ARTICLE I**

The name of the corporation is Consumer Credit Counseling Service of Maryland and Delaware, Inc.

**ARTICLE II**

It is incorporated under the laws of MD

**ARTICLE III**

It is not conducting affairs in the state of Rhode Island.

**ARTICLE IV**

It hereby surrenders its authority to conduct affairs in the state of Rhode Island.

**ARTICLE V**

It revokes the authority of its registered agent in Rhode Island to accept service of process and consents that service of process in any action, suit, or proceeding based upon any cause of action arising in Rhode Island during the time the corporation was authorized to conduct affairs in Rhode Island may hereafter be made on the corporation by service thereof on the Secretary of State of the State of Rhode Island.

**ARTICLE VI**

The post office address to which the secretary of state may mail a copy of any process against the corporation that may be served on him or her is:

COGENCY GLOBAL, INC, 222 JEFFERSON BOULEVARD WARWICK, RI 02888

**Signed this 28 Day of June, 2018 at 10:32:24 AM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

CONSUMER CREDIT COUNSELING SERVICE OF MARYLAND AND DELAWARE, INC.  
Exact Name of Corporation Making Application

By HELENE D. RAYNAUD

President or  Vice President (check one)

**AND**

By DAVID B. HALL

Secretary or  Assistant Secretary (check one)

Form No. 254  
Revised 09/07

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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:

June 28, 2018 10:30 AM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea  
*Secretary of State*

