State of Rhode Island and Providence Plantations Department of State - Business Ser		SECRETA CORPOR	
Application for Certificate of Author FOREIGN Business Corporation → Filing Fee: \$310.00 minimum Pursuant to the provisions of RIGL <u>7-1.2-1405</u> , the un applies for a Certificate of Authority to transact busine for that purpose submits the following statement:	dersigned foreign corporation he	-	
1. The name of the corporation is:			
NLR,INC.			
2. It is incorporated under the laws of: Connection	cut		
3. The name, if different, which it elects to use in Rho	ode Island is:		
 (a) If the name of the corporation in its jurisdiction of "incorporated", or "limited," or an abbreviation thereo above corporate endings for use in Rhode Island: (b) If the corporate name is not available in Rhode Is corporation will qualify and transact business in Rhode Island: 	f, then list the name of the corpo sland, then set forth below the fig	pration with the addition of one of the ctitious name under which the	
4. The date of its incorporation is: November 14	I, 1994		
And the period of its duration is: CHECK ONE BOX Perpetual (on-going) Date certain for dissolution	ONLY		
5. The address of its principal office is:			
256 Main Street, Suite B; East Windsor, CT 06088	3		
6. The name and address of the initial registered age	ent/office in Rhode Island:		
Agent Name InCorp Services, Inc.			
Street Address (NQT a PO. Box) 222 Jefferson Blv	d., Suite 200		
City/Town Warwick	State RHODE ISLAND	Zip Code 02888	

MAIL TO: Division of Business Services 148 W River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040 Website: www.sos.ri.gov

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7 The purpose or purpo	oses which it proposes to pursue	in the transaction of t	pusiness in Rhode Island are:	
Universal Waste Recy	cling Services to be provided t	to locations through	out the state of Rhode Island.	
8. (a) The names and restate or country of which		ors (optional, unless di	irectors are required under the laws of the	
NAME		A	DDRESS	
		·	· · · · · · · · · · · · · · · · · · ·	
·			<u> </u>	
· · · · · · · · · · · · · · · · · · ·			Check the box to indicate an attachment	
		bal officers (mandatory	y if directors are not required under the laws	
	of which it is incorporated):		1000500	
OFFICE	NAME		ADDRESS	
PRESIDENT	Raymond W. Graczyk	15 West Stree	et,Windsor Locks, CT 06096	
VICE PRESIDENT	Robert E. Robert	26 Hooker Dr	26 Hooker Drive, West Hartford, CT 06107	
TREASURER	Raymond W. Graczyk	15 West Stree	15 West Street, Windsor Locks, CT 06096	
SECRETARY	Robert E. Robert	Dert 15 West Street, Windsor Locks, CT 06096		
<u>_</u>	L	<u>_</u>	Check the box to indicate an attachment	
9. The aggregate numb par value, and series, if		ty to issue, itemized b	y classes, par value of shares, shares without	
NUMBER OF SHARES	CLASS	SERIES	PAR VALUE OR STATE NO PAR VALUE	
20000	Common		0.00	
5000	Preferred		0.00	
10. An estimate, as a p	ercentage, of the proportion tha	t the estimated value	of the property of the corporation to be	
the following year, whe	e during the following year bears rever located. (Note: Percentage	o the value of all prop obtained from works	perty of the corporation to be owned during heet.)	
0.0				
%	0			
at or from places of bus	percentage, of the proportion of siness in Rhode Island during the protocol of the siness in Rhode Island during the solution during the following year.	e following year compa	business to be transacted by the corporation ared to the gross amount thereof which will be stained from worksheet.)	
0.5 %	6			

12. This application must be accompanied by a <u>Certificate of Good Standing/Le</u> formation dated within 60 days of the date of this filing.	etter of Status from the state or country of		
13. Date when the Certificate of Authority will be effective: CHECK ONE BOX			
✓ Date received (Upon filing)			
Later effective date (Date must be no more than 90 days from the date of	filing)		
Under penalty of perjury, I declare and affirm that I have examined this Applica accompanying attachments, and that all statements contained herein are true a			
Type or Print Name of Authorized Officer	Date		
Robert E. Robert	August 23, 2018		
Signature of Authorized Officer of the Corporation			

Secretary of The State of Connecticut

I, the Secretary of The State of Connecticut, and keeper of the seal thereof, DO HEREBY CERTIFY, that the certificate of incorporation of

NLR, INC.

a domestic STOCK corporation, was filed in this office on November 14, 1994.

A certificate of amendment for NORTHEAST LAMP RECYCLING, INC., changing its name to NLR. INC., was filed on October 12, 2007.

A certificate of dissolution has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of this office such corporation is in existence.

Jemin Shenk

Secretary of The State of Connecticut

Date Issued: August 17, 2018



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 23, 2018 11:19 AM

Tulli U. Kole

Nellie M. Gorbea Secretary of State

